

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90118 045 ***150.00

0013330 MB

DOCUMENT # F02000006296

1. Entity Name

GEO-SYNTHETICS OF FLORIDA, INC.



Principal Place of Business
W239 N428 PEWAUKEC ROAD
WAUKESHA WI 53188

Mailing Address
W239 N428 PEWAUKEC ROAD
WAUKESHA WI 53188

11011106



2. Principal Place of Business

W 239 N428 PEWAUKEE RD
Suite, Apt. #, etc.

3. Mailing Address

W239 N428 PEWAUKEE ROAD
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

WAUKESHA, WI

City & State

WAUKESHA, WI

4. FEI Number

39-1373321

Applied For

Not Applicable

Zip

53188

Country

Zip

53188

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME LICAU, FRED
STREET ADDRESS 6134 S 120TH STREET
CITY-ST-ZIP WAUKESHA WI 53130

TITLE D ☐ Delete
NAME BATES, RANDY
STREET ADDRESS 2902 BUCKINGHAM COURT
CITY-ST-ZIP WAUKESHA WI 53188

TITLE D ☐ Delete
NAME MYERS, TOM
STREET ADDRESS 1000 N WATER STREET
CITY-ST-ZIP MILWAUKEE WI 53203

TITLE P ☐ Delete
NAME GROH, ROBERT F
STREET ADDRESS W239 N428 PEWAUKEC ROAD
CITY-ST-ZIP WAUKESHA WI 53188

TITLE CEO ☐ Delete
NAME HERRO, MICHAEL N
STREET ADDRESS W239 N428 PEWAUKEC ROAD
CITY-ST-ZIP WAUKESHA WI 53188

TITLE S ☐ Delete
NAME NELSON, SCOTT O
STREET ADDRESS W239 N428 PEWAUKEC ROAD
CITY-ST-ZIP WAUKESHA WI 53188

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Change ☐ Addition
NAME GROH, ROBERT F.
STREET ADDRESS W239 N428 PEWAUKEE ROAD
CITY-ST-ZIP WAUKESHA, WI 53188

TITLE CEO ☒ Change ☐ Addition
NAME HERRO, MICHAEL N.
STREET ADDRESS W239 N428 PEWAUKEE ROAD
CITY-ST-ZIP WAUKESHA, WI 53188

TITLE S ☒ Change ☐ Addition
NAME NELSON, SCOTT O.
STREET ADDRESS W239 N428 PEWAUKEE ROAD
CITY-ST-ZIP WAUKESHA, WI 53188

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott O. Nelson, Secretary 2-5-03

Date

Daytime Phone #

262-524-7979

CR2E034 (10/02)