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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F04237 (6)

1. Corporation Name

HCC ENVIRONMENTAL SERVICES, INC.



Principal Place of Business

Mailing Address

9829 NE CR 1469 BOX 69  
EARIETON FL 32631

9829 N.E. CR. 1469 BOX 79  
EARIETON FL 32631  
US

2. Principal Place of Business

2a. Mailing Address

21 MIDWAY PLAZA, S.R. 21

26 PO BOX 487

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 4

27

23 MELROSE FL

28 EARIETON FL

City & State

City & State

Zip

Country

Zip

Country

24 32631

25 US

29 32631

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HATCH, EARL R JR.  
9829 N.E. CR 1469  
EARIETON FL 32631

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0532 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

DATE Registered Agent Signature required when not standing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME HATCH, EARL R, JR.  
STREET ADDRESS 9829 NE CR 1469 BOX 69  
CITY-ST-ZIP EARIETON FL

12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE VP ☐ DELETE

2.1 TITLE ☐ Change ☒ Addition

NAME PUCINO, LARRY M.  
STREET ADDRESS 430 NE 10 ST.  
CITY-ST-ZIP GAINESVILLE FL 32602

22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE S/T ☐ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME HATCH, MONICA A.  
STREET ADDRESS 9829 NE CR 1469, BOX 69  
CITY-ST-ZIP EARIETON FL 32631

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 (352) 475-4804  
Date Daytime Phone #

CR2E034 (12/95)