

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 22, 2005 8:00 am**  
**Secretary of State**

04-22-2005 90306 023 \*\*\*150.00

**DOCUMENT # F89551**

1. Entity Name

ENVIRO WORLD SYSTEMS OF FLORIDA, INC.



Principal Place of Business

17879 SE 95TH ST RD  
OKLAWAHA FL 32179  
US

Mailing Address

17879 SE 95TH ST RD  
OKLAWAHA FL 32179  
US

**50042578**



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2290198

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

~~FREEEL, DANA L.~~  
17879 SE 95TH ST RD  
OKLAWAHA FL 32179

7. Name and Address of New Registered Agent

Name Herbert--Freeel  
Street Address (P.O. Box Number is Not Acceptable)  
17879 SE 95TH ST Rd

City OKlawaha

FL Zip Code 32179

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

Herbert L Freeel

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Pres

4-18-05

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 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 VST ☐ Delete  
NAME FREEL, DARLENE V  
STREET ADDRESS 17879 SE 95TH ST RD  
CITY-ST-ZIP OKLAWAHA, FL 00000

TITLE P ☐ Delete  
NAME FREEL, HERBERT L  
STREET ADDRESS 17879 SE 95TH ST RD  
CITY-ST-ZIP OKLAWAHA, FL 00000

TITLE D ☐ Delete  
NAME FREEL, DANA L  
STREET ADDRESS 17879 SE 95TH ST RD  
CITY-ST-ZIP OKLAWAHA, FL 00000

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 ☐ 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

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:

Herbert L Freeel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-05

Date

Daytime Phone #

352-288-3234