

FILED
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90183 001 *1,050.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

Synagro of Texas -
Vital-Cycle, Inc.

DO NOT WRITE IN THIS SPACE

98107

2. Principal Place of Business

89111 OVERSEAS Hwy

Suite, Apt. #, etc.

3. Mailing Address

1800 BERING

Suite, Apt. #, etc.

1000

DO NOT WRITE IN THIS SPACE

City & State

TAVERNIER, FL

City & State

HOUSTON, TEXAS

4. FEL Number

39-1763997

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

9. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President/Director
NAME	Ross M. Patten
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057
TITLE	Vice President/Director
NAME	Mark A. Rome
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057
TITLE	Vice President/Secretary
NAME	Alvin L. Thomas
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057
TITLE	Vice President/Treasurer
NAME	J. Paul Withrow
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057
TITLE	Vice President
NAME	Robert C. Boucher
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057
TITLE	Vice President
NAME	James P. Carmichael
STREET ADDRESS	1800 Bering, Suite 1000
CITY-ST-ZIP	Houston, Texas 77057

TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alvin L. Thomas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-1-02

DATE

713 869 1744

Daytime Phone #