2000 UNIFORM BUSINESS REPORT (UBR)

Apr 28, 2000 8:00 am Secretary of State DOCUMENT # **F97000004782** 04-28-2000 90077 012 ***150.00 ETI ENVIRONMENTAL PROFESSIONALS, INC. Principal Place of Business Mailing Address 555 ZANG ST., STE, 104 555 ZANG ST., STE, 104 721679 LAKEWOOD CO 80228 LAKEWOOD CO 80228-1011 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 84-1216631 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Dana Koch FREEDMAN, JONI Street Address (P.O. Box Number is Not Acceptable) 4902 Eisenhower Blvd., #150 28870 U.S. HWY. 19 **CLEARWATER FL 34619** Zin Code 33634 City Tampa 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. gent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **CPST** ☐ Addition ☐ Delete TITLE TITLE HOLLAND, SUSAN K NAME NAME STREET ADDRESS 555 ZANG ST., STE. 104 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKEWOOD CO 80228 Vice Preisent/Director Change Addition ☐ Delete TITLE TITLE Allen Christy NAME STREET ADDRESS 555 Zang Street, #104 Lakewood, Colorado 80228 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Vice President/Director ☐ Delete ☐ Change X Addition TITLE TITLE Gregory J. Kilkenny NAME STREET ADDRESS 555 Zang Street, #104 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Lakewood, Colorado 80228 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAU K HOU and TO THE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Dayling Phone *

13. 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 11 or Block 12 if