## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

## **FILED** Feb 26, 2000 8:00 am Secretary of State DOCUMENT # F9800003764 1. Entity Name ENVIRONMENTAL STRUCTURES, INC. 02-26-2000 90016 002 \*\*\*150.00 Mailing Address Principal Place of Business N57 W13658 REICHERT AVENUE N57 W13658 REICHERT AVENUE MENOMONEE FALLS WI 53051-6106 MENOMONEE FALLS WI 53051 C0025349 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 39-1827705 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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. 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PCFO** ☐ Change Addition TITI F TITLE ☐ Delete DOHOGNE, JOHN-A NAME NAME STREET ADDRESS STREET ADDRESS N57 W13658 REICHERT AVENUE CITY-ST-ZIP **MENOMONEE FALLS WI 53051** CITY-ST-7IP Addition WC ☐ Change ☐ Delete TITLE TITLE BERTELSON, JEFFREY NAME NAME N57 W13658 REICHERT AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MENOMONEE FALLS WI 53051** CITY-ST-ZIP - Delete ☐ Change Addition TITLE TITLE -RAY, RK NAME NAME STREET ADDRESS STREET ADDRESS N57 W13658 REICHERT AVENUE CITY-ST-ZIP CITY-ST-ZIP **MENOMONEE FALLS WI 53051** ☐ Change Addition Defete TITLE TITLE BARKE, BRAD NAME NAME STREET ADDRESS STREET ADDRESS N57 W13658 REICHERT AVENUE CITY-ST-ZIP CITY-ST-ZIP **MENOMONEE FALLS WI 53051** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this thing 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 trusted exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if