

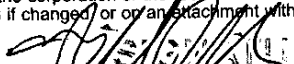
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 17, 1999 8:00am
Secretary of State

02-17-1999 90086 026 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F98000006442					
1. Corporation Name THE ENVIRONMENTAL COMPANY, INC.					
Principal Place of Business PO BOX 5127 CHARLOTTESVILLE VA 22905			Mailing Address PO BOX 5127 CHARLOTTESVILLE VA 22905		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/23/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 54-1524820	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			81	Name	
			82	Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84	City	85
			FL		
11. Pursuant to the provisions of Sections 607.0502 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 ☐ with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS					
TITLE	PC	☐ DELETE			
NAME	CORNELIUS, RICHARD M				
STREET ADDRESS	2496 OLD IVY ROAD, SUITE 300				
CITY-ST-ZIP	CHARLOTTESVILLE VA 22903				
TITLE	DV	☐ DELETE			
NAME	HEIDERSTADT, RICHARD T				
STREET ADDRESS	2496 OLD IVY ROAD, SUITE 300				
CITY-ST-ZIP	CHARLOTTESVILLE VA 22903				
TITLE	DV	☐ DELETE			
NAME	WILSON, JACK E				
STREET ADDRESS	2496 OLD IVY ROAD, SUITE 300				
CITY-ST-ZIP	CHARLOTTESVILLE VA 22903				
TITLE	D	☐ DELETE			
NAME	MONTOYA, BENJAMIN F				
STREET ADDRESS	PUBLIC SVC CO OF NEW MEX, ALVAREDO SQUARE				
CITY-ST-ZIP	ALBUQUERQUE NM 87518				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		☐ Change ☐ Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP		☐ Change ☐ Addition			
2.1 TITLE		☐ Change ☐ Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP		☐ Change ☐ Addition			
3.1 TITLE		☐ Change ☐ Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP		☐ Change ☐ Addition			
4.1 TITLE		☐ Change ☐ Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP		☐ Change ☐ Addition			
5.1 TITLE		☐ Change ☐ Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP		☐ Change ☐ Addition			
6.1 TITLE		☐ Change ☐ Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					

14. 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 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, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99

804-295-4446

Date

Daytime Phone #

CR2E034 (1/98)