2002 UNIFORM BUSINESS REPORT (UBR)

May 12, 2002 8:00 am Secretary of State **DOCUMENT #** F99000004900 1. Entity Name BONDURANT ENVIRONMENTAL CONSULTANTS, INC. 05-12-2002 90548 011 ***150.00 Principal Place of Business Mailing Address 3590 LORNA RIDGE DRIVE 3580 LORNA RIDGE DRIVE **BIRMINGHAM AL 35216** BIRMINGHAM AL 35216 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 63-1176426 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUNTER, JONATHAN A Street Address (P.O. Box Number is Not Acceptable) 13430 GULF BEACH HIGHWAY, OFFICE 3 PENSACOLA FL 32507 City 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PC ☐ Delete TITLE ☐ Change ☐ Addition BONDURANT, ALBERT W NAME NAME STREET ADDRESS 3580 LORNA RIDGE DRIVE STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35216** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BONDURANT, LYNN A NAME STREET ADDRESS 3580 LORNA RIDGE DRIVE STREET ADDRESS CITY-ST-7IE **BIRMINGHAM AL 35216** CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change-- Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TIT! F Change ☐ Addition NAME NAME STREET ADDRESS

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 of 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 or director of the same legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath; that I am an officer or director of the legal effect as if made under oath is a second of the legal effect as if made under oath is a second of the legal effect o ndicated on this report or supplemen of the corporation or the receive changed, or on an attachment w vith all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)

FILED