

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

page 1 of 2

DOCUMENT # H90526

(5)

1. Corporation Name

ADVANCED SEPARATION TECHNOLOGIES INCORPORATED



Principal Place of Business

Mailing Address

% PAULINE M. FRY
ONE PROGRESS PLAZA P.O. BOX 33042
ST. PETERSBURG FL 33701-4306

%PAULINE M. FRY
ONE PROGRESS PLAZA P.O. BOX 33042 STE.2600
ST. PETERSBURG FL 33701-4306

3. Date Incorporated or Qualified
12/18/1985

3a. Date of Last Report
04/04/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-2638277

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRY, PAULINE M.
ONE PROGRESS PLAZA
SUITE 2600
ST. PETERSBURG FL 33701

81 Name

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

83

84 City

FL

85 Zip Code

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(If not: Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	KORPAN, RICHARD	
STREET ADDRESS	ONE PROGRESS PLAZA	
CITY- ST- ZIP	ST PETERSBURG FL	
TITLE	DPCE	<input type="checkbox"/> DELETE
NAME	BRYANT, DUDLEY E	
STREET ADDRESS	5315 GREAT OAK DRIVE	
CITY- ST- ZIP	LAKELAND FL 33801	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCONOMY, JOHN M.	
STREET ADDRESS	900 19TH STREET N.W.	
CITY- ST- ZIP	WASHINGTON DC	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	CRITCHFIELD, JACK B.	
STREET ADDRESS	ONE PROGRESS PLAZA	
CITY- ST- ZIP	ST. PETERSBURG FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SMALLWOOD, JAMES V	
STREET ADDRESS	3201 34TH ST. S.	
CITY- ST- ZIP	ST. PETERSBURG FL 33711	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HALEY, KATHLEEN M.	
STREET ADDRESS	ONE PROGRESS PLAZA	
CITY- ST- ZIP	ST. PETERSBURG FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	33701
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	20006
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	33701
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	33701

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Kathleen M. Haley

KATHLEEN M. HALEY,
SECRETARY

3/18/96 8130 824-6531

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)

H 90526

2 of 2

ADVANCED SEPARATION TECHNOLOGIES INCORPORATED

<u>NAMES OF OFFICERS AND DIRECTORS</u>	<u>TITLE</u>	<u>STREET ADDRESS</u>	<u>CITY AND STATE</u>
Bryant, Dudley E.	D/P/CEO	5315 Great Oak Dr.	Lakeland, FL 33801
Critchfield, Jack B.	D/C	One Progress Plaza	St. Petersburg, FL 33701
Korpan, Richard	D	One Progress Plaza	St. Petersburg, FL 33701
McConomy, J. M.	D	900 19th Street NW	Washington, DC 20006
Naughton, Paul F.	D	900 19th Street NW	Washington, DC 20006
Richardson, Joseph H.	D	3201 34th Street, So.	St. Petersburg, FL 33711
Tenicki, Joseph J.	D	270 Park Avenue	New York, NY 10017
Bartholomae, John J.	V	5315 Great Oak Dr.	Lakeland, FL 33801
Riley, Ronald J.	V	5315 Great Oak Dr.	Lakeland, FL 33801
Rossiter, Gordon J.	V	5315 Great Oak Dr.	Lakeland, FL 33801
Weiss, Steven M.	V	5315 Great Oak Dr.	Lakeland, FL 33801
Haley, Kathleen M.	S	One Progress Plaza	St. Petersburg, FL 33701
Smallwood, James V.	T	3201 34th Street, So.	St. Petersburg, FL 33711
Armstrong, Kenneth E.	AS/G	3201 34th Street, So.	St. Petersburg, FL 33711

A = Assistant
C = Chairman of the Board
D = Director
P = President
S = Secretary
T = Treasurer
V = Vice President
G = General Counsel