2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J47784

APOLLO ENVIRONMENTAL, INC.

Principal Place of Business Mailing Address 11553 US 41 SOUTH POST OFFICE BOX 239 GIBSONTON FL 33534-5223 GIBSONTON FL 33534-0239 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2755607 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 WILLIAMSON, KAY G Street Address (P.O. Box Number is Not Acceptable) 2512 RIVER BEND DRIVE RUSKIN FL 33570 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 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, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ⊅/V/≲ Delete TITLE X Change ☐ Addition Williamson, Michael L. NAME WILLIAMSON, KAY G MAME STREET ADDRESS asıa River Bend Drive 2512 RIVER BEND DRIVE STREET ADDRESS CITY-ST-ZIP Ruskin, FL 33570 CITY-ST-7IP RUSKIN FL 33570 VS TITLE **⊠** Delete TITLE Change ☐ Addition WILLIAMSON, MICHAEL L MAME NAME STREET ADDRESS 2512 RIVER BEND DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RUSKIN FL 33570 Delete TITLE ☐ Change Addition LEGGETT, L. RANDALL NAME STREET ADDRESS 2209 CHEROKEE TRAIL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 TITLE Delete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

☐ Delete

☐ Delete

Kay G. Williamson 02/08/01

Change

Change

Addition

Addition

Feb 28, 2001 8:00 am

Secretary of State

02-28-2001 90113 002 ***150.00