2002 UNIFORM BUSINESS REPORT (UBR)

J47784 DOCUMENT # **Secretary of State** 1. Entity Name 03-13-2002 90056 001 ***158.75 APOLLO ENVIRONMENTAL, INC. Mailing Address Principal Place of Business 11553 US 41 SOUTH POST OFFICE BOX 239 GIBSONTON FL 33534-0239 GIBSONTON FL 33534-5223 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2755607 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WILLIAMSON, KAY G Street Address (P.O. Box Number is Not Acceptable) 2512 RIVER BEND DRIVE RUSKIN FL 33570 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01) ☐ Change Addition DPT TITLE ☐ Delete TITLE WILLIAMSON, KAY G NAME NAME STREET ADDRESS 2512 RIVER BEND DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP RUSKIN FL 33570 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME WILLIAMSON, MICHAEL L 2512 RIVER BEND DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP RUSKIN FL 33570 ☐ Addition ☐ Change 🛛 Delete TITLE TITLE NAME LEGGETT, L. RANDALL NAME STREET ADDRESS STREET ADDRESS 2209 CHEROKEE TRAIL CITY-ST-ZIP CITY-ST-ZIP VALRICO FL 33594 Change ☐ Addition ☐ Delete 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 CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 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 eath; 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

FILED Mar 13, 2002 8:00 am

Daytime Phone #

Date