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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

JACKSONVILLE FL 32216

4190 BELFORT ROAD

SUITE 200



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 03 1997 8:00am

Secretary of State

3. Date Incorporated or Qualified 3a. Date of Last Report

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K51789

(1)

Mailing Address

SUITE 200

4190 BELFORT ROAD

JACKSONVILLE FL 32216-5891

EPI, ENVIRONMENTAL PROFESSIONALS, INC.

Substitution Subs						12/16/1988	02/15/1996	
Substitution Subs	2. Principal Place of Business		2e. Mailing Address			Ar	oplied For	
City & Status	21		26			59-2925212 Not Applicab		ot Applicable
City & State City & State County 28	<u>-</u>		F1	· -		5. Certificate of Status Desired		
28)				6. Election Campaign Financing	\$5.00	May Be
Zip	23		28					
Second Control Second Seco		Country	Zip	Country				. 199.032,
GALLOP, ROGER G. 4 190 BELFORT ROAD SUTTE 200 JACKSONVILLE FL 32216 80 Sircet Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Horidal Statutes, the above-need corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Roida Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with a rich accept the obligations of, Section 607 0505, Floridal Statutes, the above-need corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with a rich accept the obligations of, Section 607 0505, Floridal Statutes, the above-need corporation's board of directors. I hereby accept the appointment as registered agent agent familiar with a rich accept the obligations of, Section 607 0505, Floridal Statutes, the above-need corporation's board of directors. I hereby accept the appointment as registered agent agent familiar with a rich accept the obligations of the purpose of changing at registered agent agent familiar with a rich accept the obligations of the purpose of changing at registered agent agent familiar with a registered agent agent agent familiar with a registered agent agent agent agent familiar with a registered agent agent agent agent familiar with a registered agent a	24	25 29 30		30	Florida Statutes 🙀 Yes 🔲 No			
### 4100 BELFORT ROAD ### 2018 B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) B4 City			nt Registered Agent			10. Name and Address of New Reg	istered Agent	· · ·
SURTE 200 JACKSONVILLE FL 32218 2				B1	Name			
SURTE 200 JACKSONVILLE FL 32216 8 City FL 85 Zip Code 11. Pursuant to the provisions of Snetions 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent of members with, and except the deploint of statutes and institute with and except the deploint of statutes. The recipitate of agent, or both, in the State of Tonida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent from familiar with, and except the deploint agent and third agent and the registered agent age				B2	Street Addre	ss (P.O. Box Number is Not Acceptabl	e)	
11. Pursuant to the provisions 607 0502 and 607 1508 Florids Statutes, the above-named corporation submits this statement for the purpose of changing at registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponitment as registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponitment as registered agent, or both, in the State of Florida Statutes agent and the registered sport agent and the registered sport and the registered sport and the registered sport agent agent and the registered sport agent agent and the registered sport agent								
THE CHARGES IN THE BAY LANE PONTE VEDRA BCH. FL DELETE 21 TRILE 22 SHREET ADDRESS	JAC	CKSONVILLE FL 32216		63	83			
1.1				84	City		F1 85 Zip	Code
olice 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 agent are familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SORNATURE	11. Pursuant t	to the provisions of Sections 607 050	12 and 607 1508. Florida State	utes the above	a-named corno	oration submits this statement for the nu	proose of changing i	ts registered
Name	office or re agent 1 ar	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was jations of, Section 607.0505, F	s authorized by Florida Statutes	the corporation	on's board of directors. I hereby accept	t the appointment as	registered
THE PS	SIGNATURE	Signature typad or present ranse of registered ag	ent and title r ⁱ appticable (N C	OTE: Registered Age	nt signature require			
NAME STREET ADDRESS TUTLE BAY LANE TOTAL STREET ADDRESS TUTLE BAY LANE TUTLE TUT	12.			13.		ADDITIONS/CHANGES TO OFFICE		
13 TURTLE BAY LANE	TOLE	. •	L DELETE	1.1 TITLE			☐ Change	Addition
CITY-ST-ZIP	NAME			1.2 NAME				
THE	STREET ADDRESS			1.3 STREET	ADDRESS			
NAME	CITY - ST - 7IP	PONTE VEDRA BCH. FL	· · · · · · · · · · · · · · · · · · ·	1.4 CITY - S	T-ZIP			
2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CIT	TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
CITY-ST-ZIP	NAME			2.2 NAME				
TITLE	STREET ADDRESS			2.3 STREET	ADDRESS			
STHEEL ADDRESS 33 STREET ADDRESS	CITY - S1 - ZIP			2. 4 CITY-5	ST-ZIP			
33 STREET ADDRESS 34 CITY - ST - ZIP	TITLE	L DELETE		3.1 TITLE			L. Change	Addition
CITY-ST-ZIP	NAME			3.2 NAME				
DELETE	STREET ADDRESS			3.3 STREET	ADDRESS			
NAME					ST-ZIP			
STREET ADDRESS	TITLE		L_I DELETE	4.1 TITLE			L Change	☐ Addition
A 4 City-St-ZiP	NAME			4. 2 NAME				
DELETE	STREET ADDRESS			4.3 STREET	ADDRESS			
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	NAME			6.2 NAME				
0.1.07.07.70	STREET ADORESS			6.3 STREET	ADDRESS			
CHY-SI-ZIP 6.4 CHY-SI-ZIP	CHTA- ST-ZIE			6.4 CITY - S	T - ZIP	·		
14. I do 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; the farm 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	informatio	in indicated on this annual report or	supplemental annual report is	s true and acci	rate and that i	my signature shall have the same legal	l effect as if made ur	nder oath; that

Roger G. Gallop

1/26/97

904/281-0801

SIGNATURE:

appears in Block 12 or Block