

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

FILED

Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **K75166** (4)

1. Corporation Name:
SOUTHEASTERN ENVIRONMENTAL AUDITS, INC.

Principal Place of Business

Mailing Address

**8711 PERIMETER PARK BLVD
SUITE 11
JACKSONVILLE FL 32216**

**8711 PERIMETER PARK BLVD
SUITE 11
JACKSONVILLE FL 32216-8386**



2. Principal Place of Business

2a. Mailing Address

21 **Same**

26 **Same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified

3a. Date of Last Report

03/24/1989

04/23/1996

4. FEI Number

Applied For

59-2948605

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

**HIEB, E. ALLEN, JR.
1301 GULF LIFE DR
STE 1500
JACKSONVILLE FL 32207**

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

Signatures of the corporation and the registered agent are required if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **ROBINSON, I. RHODES, JR.**
STREET ADDRESS **8711 PERIMETER PK BLD 11**
CITY - ST - ZIP **JACKSONVILLE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VP** ☒ DELETE
NAME **ZYSKI, NANCY C.**
STREET ADDRESS **8711 PERIMETER PK BLD 11**
CITY - ST - ZIP **JACKSONVILLE FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **Executive Vice Pres.**
2.3 STREET ADDRESS **Michael L. Wilson**
2.4 CITY - ST - ZIP **8711 Perimeter Park Blvd #11**
Jacksonville, FL 32216

TITLE **ST** ☐ DELETE
NAME **ROBINSON, SARAH S**
STREET ADDRESS **8711 PERIMETER PARK BLVD, STE 11**
CITY - ST - ZIP **JACKSONVILLE FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - 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; 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 unchanged, or on an addition with an address.

SIGNATURE:

Michael L. Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97
Date

(904) 645-9000
Daytime Phone #

CR2E034 (9/96)