

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116288

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: HANDEX CONSULTING AND REMEDIATION - NORTHEAST, LLC

## Current Principal Place of Business:

30941 SUNEAGLE DRIVE  
MT. DORA, FL 32757

## New Principal Place of Business:

## Current Mailing Address:

30941 SUNEAGLE DRIVE  
MT. DORA, FL 32757

## New Mailing Address:

FEI Number: 20-3908247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERKSON, GARY M  
111 NORTH ORANGE AVE.  
SUITE 1200  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SCHWARTZ, RONALD N  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: MGR ( ) Delete  
Name: FADELEY, BRETT D  
Address: 3348 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: MGR ( ) Delete  
Name: RICHARDS, BRIAN A  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MT. DORA, FL 32757

Title: MGR ( ) Delete  
Name: HEATH, IRVIN  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MT. DORA, FL 32757

Title: MGR (X) Delete  
Name: MERCER, ROBERT  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MT. DORA, FL 32757

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SCHWARTZ, RONALD N  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MOUNT DORA, FL 32757

Title: MGR (X) Change ( ) Addition  
Name: FADELEY, BRETT D  
Address: 1350 N. ORANGE AVENUE, STE 100  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR (X) Change ( ) Addition  
Name: HEATH, IRVIN R  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MT. DORA, FL 32757

Title: MGR (X) Change ( ) Addition  
Name: MERCER, ROBERT J  
Address: 30941 SUNEAGLE DRIVE  
City-St-Zip: MT. DORA, FL 32757

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT J MERCER

MR.

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date