FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Jan 23 1996 8:00 am
Secretary of State

DOCUMENT # **L06743** **(3)**

1. Corporation Name
DRAINFIELD SERVICES & DESIGN, INC.

Principal Place of Business
2647 DAVIS BLVD.
NAPLES FL 33942

Mailing Address
2647 DAVIS BLVD.
NAPLES FL 33942

3. Date Incorporated or Qualified: **08/04/1989**
3a. Date of Last Report: **04/04/1995**

2. Principal Place of Business
21
Street Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Street Apt. #, etc.
27
City & State
28
Zip 29 County 30

4. FEI Number: **65-0136937** ☐ Applied For ☐ 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

MOORE, MICHAEL A.
344 VALLEY STREAM CIRCLE
NAPLES FL 33962

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 8988 Kelly Island Circle

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.1505, 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

12. OFFICERS AND DIRECTORS

1	PMD MOORE, MICHAEL A. 344 VALLEY STREAM CIRCLE NAPLES FL	☐ DELETE
2	STD MOORE, KATHLEEN L. 344 VALLEY STREAM CIRCLE NAPLES FL	☐ DELETE
3	V KUHLMAN, JAMES B 26 WATERCOLOR WAY NAPLES FL	☐ DELETE
4		☐ DELETE
5		☐ DELETE
6		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	1-1 TITLE 1-2 NAME 1-3 STREET ADDRESS 1-4 CITY-ST-ZIP	☐ Change ☐ Addition
2	2-1 TITLE 2-2 NAME 2-3 STREET ADDRESS 2-4 CITY-ST-ZIP	☐ Change ☐ Addition
3	3-1 TITLE 3-2 NAME 3-3 STREET ADDRESS 3-4 CITY-ST-ZIP	☐ Change ☐ Addition
4	4-1 TITLE 4-2 NAME 4-3 STREET ADDRESS 4-4 CITY-ST-ZIP	☐ Change ☐ Addition
5	5-1 TITLE 5-2 NAME 5-3 STREET ADDRESS 5-4 CITY-ST-ZIP	☐ Change ☐ Addition
6	6-1 TITLE 6-2 NAME 6-3 STREET ADDRESS 6-4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 if changed, or on an attachment with an address.

Kathleen L. Moore
SIGNATURE: Kathleen L. Moore **Sec./Treasurer/Director** 1/17/96 **(941) 775-3878**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone