

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L26430

1. Entity Name

ENVIRONMENTAL RECOVERY, INC.

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90039 034 ***150.00

Principal Place of Business

251 LEVY ROAD
ATLANTIC BEACH FL 32233

Mailing Address

PO BOX 330569
ATLANTIC BCH FL 32233
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3030249**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

DALE, HOWARD L.
135 WEST BAY STREET
SUITE 200
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	HORNER, HARRY B.	251 LEVY ROAD	ATLANTIC BEACH FL	<input type="checkbox"/>
PD	JENKINS, STEVEN T.	251 LEVY RD	ATLANTIC BEACH FL	<input type="checkbox"/>
VD	GORDON, RUSSELL B. S	251 LEVY RD	ATLANTIC BEACH FL	<input type="checkbox"/>
D	CONNOLLY, JOHN W JR	251 LEVY ROAD	ATLANTIC BEACH FL	<input type="checkbox"/>
C	ZECHELLA, ALEXANDER P	251 LEVY ROAD	ATLANTIC BCH FL	<input type="checkbox"/>
D	JENKINS, SYDNEY J	251 LEVY RD	ATLANTIC BCH FL	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Posey H. Jenkins*

POSEY H. JENKINS, SEC/TREASURER 01/11/01 (904)241-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)