

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **L26537** (5)

1. Corporation Name

**EARTH REMEDIATION SERVICES, INC.**



Principal Place of Business

**1353 N COURTENAY PKWY  
STE T  
MERRITT ISLAND FL 32953  
US**

Mailing Address

**1353 N COURTENAY PKWY  
STE T  
MERRITT ISLAND FL 32953  
US**

3. Date Incorporated or Qualified  
**10/31/1989**

3a. Date of Last Report  
**04/04/1995**

4. FEI Number

**59-2989026**

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

2. Principal Place of Business

2a. Mailing Address

21 **OK on Station**  
Suite, Apt. #, etc.

26 **OK on Station**  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HEYEN, PETER M.  
1353 N COURTENAY PKWY  
STE T  
MERRITT ISLAND FL 32953**

81 Name

**OK**

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

Signature typed or printed name of registered agent and that of applicant

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME **HEYEN, PETER M.**  
STREET ADDRESS **1353 N COURTENAY PKWY, STE T**  
CITY-ST-ZIP **MERRITT ISLAND FL**

12 NAME

TITLE ☐ DELETE

13 STREET ADDRESS

NAME **TEALE, CHARLES E.**

14 CITY-ST-ZIP ☐ Change ☐ Addition

STREET ADDRESS **57 SOUTH RIVER RD**

2.1 TITLE

CITY-ST-ZIP **BEDFORD NH**

22 NAME

TITLE ☐ DELETE

23 STREET ADDRESS

NAME **BEE, LAWRENCE L JR**

24 CITY-ST-ZIP ☐ Change ☐ Addition

STREET ADDRESS **21 BUSINESS PARK DR**

3.1 TITLE

CITY-ST-ZIP **BRANFORD CT**

32 NAME

TITLE ☐ DELETE

33 STREET ADDRESS

NAME

34 CITY-ST-ZIP ☐ Change ☐ Addition

STREET ADDRESS

4.1 TITLE

CITY-ST-ZIP

42 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

43 STREET ADDRESS

NAME

44 CITY-ST-ZIP ☐ Change ☐ Addition

STREET ADDRESS

5.1 TITLE

CITY-ST-ZIP

52 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

53 STREET ADDRESS

NAME

54 CITY-ST-ZIP ☐ Change ☐ Addition

STREET ADDRESS

6.1 TITLE

CITY-ST-ZIP

62 NAME ☐ Change ☐ Addition

STREET ADDRESS

63 STREET ADDRESS

CITY-ST-ZIP

64 CITY-ST-ZIP

14. I do 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)(k), Florida Statutes. I further certify that the information indicated in 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 assignee 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, including all or part of attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)