

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L68860

FILED
Mar 18, 2009
Secretary of State

Entity Name: ENVIRONMENTAL COMPOSITES, INC.

Current Principal Place of Business:

4250 LAKE INDUSTRIAL BLVD
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

4250 LAKE INDUSTRIAL BLVD
TAVARES, FL 32778

New Mailing Address:

FEI Number: 59-3016409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, CHESTER L., JR.
10712 SUMMIT SQUARE RD
LEESBURG, FL 34788 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SIMMONS, CHESTER L., JR.
Address: 10712 SUMMIT SQ RD
City-St-Zip: LEESBURG, FL 34788

Title: VD (X) Delete
Name: SIMMONS, CHESTER
Address: 28043 LEUTY ROAD
City-St-Zip: OKAHUMPKA, FL 34762

Title: VSD () Delete
Name: SIMMONS, DIANNE
Address: 10712 SUMMIT SQ RD
City-St-Zip: LEESBURG, FL 34788

Title: VD () Delete
Name: BOSTON, MARY J
Address: 17223 HOLLY COURT
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C L SIMMONS

PTD

03/18/2009

Electronic Signature of Signing Officer or Director

Date