

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L72075** (9)

1. Corporation Name
ECH RECYCLING, INC.

Principal Place of Business Mailing Address
% BABETTE L. FLETCHER
6622 SOUTHPOINT DR S., STE 310
JACKSONVILLE FL 32216-6188

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/09/1990	3a. Date of Last Report 05/01/1994
4. FEI Number 59-3022129	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation has liability for the public fee under S. 109.002, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt # etc 22	Suite, Apt # etc 27
City & State 23	City & State 28
Zip 24	Zip 29
COUNTY 25	COUNTY 30

9. Name and Address of Current Registered Agent
FLETCHER, BABETTE L
5020 N LAURA ST
STE 3100, BARNETT CENTER
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
Kirchner, Maln, Petrie, Graham, Tanner & Demont
83
One Independent Drive, Ste. 2000
84 City
Jacksonville 85 Zip Code
FL 32202

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. Thereby 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

TITLE	DC
NAME	ARCAINI, GIOVANNI B.
STREET ADDRESS	7889 HUNTERS GROVE RD
CITY, ST, ZIP	JACKSONVILLE FL
TITLE	DPT
NAME	GIBBES, WILLIAM R.
STREET ADDRESS	1428 INDIAN WOODS DRIVE
CITY, ST, ZIP	NEPTUNE BEACH FL
TITLE	S
NAME	FLETCHER, BABETTE L.
STREET ADDRESS	5020 YACHT CLUB RD
CITY, ST, ZIP	JACKSONVILLE FL
TITLE	D
NAME	MANNING, G STEPHEN
STREET ADDRESS	12163 TWAIN OAKS LANE
CITY, ST, ZIP	JACKSONVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	32256
21 TITLE	<input checked="" type="checkbox"/> Addition
22 NAME	500001423
23 STREET ADDRESS	05/10/95-11016-008
24 CITY, ST, ZIP	****208.75 ****208.75
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	32210
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	32223
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
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 Sections 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct 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 the 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.

SIGNATURE: **William R. Gibbes, President**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 904-296-2800
Toll Free