FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****225.00 ****225.00

DOCUMENT # **L83307** **(3)**

1. Corporation Name

WESTSTAR ENVIRONMENTAL, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
407 W GEORGIA ST STARKE FL 32091 US	407 W GEORGIA ST STARKE FL 32091 US

3. Date Incorporated or Qualified: **06/26/1990**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business	2a. Mailing Address
21 Route 4 Box 1555-C	26 P.O. Box 6003
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Starke, FL	City & State 28 Starke, Florida
Zip 24 32091 Country 25	Zip 29 32091 Country 30

4. FEI Number: **59-3066915** ☐ 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	10. Name and Address of New Registered Agent
RICKS, MICHAEL 6249 KINGSLEY LAKE DR STARK FL 32091	81 Name 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: Michael E. Ricks pres. DATE

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	TRIEST, ERNEST E JR.	12 NAME	
STREET ADDRESS	POST OFFICE BOX 953 NA	13 STREET ADDRESS	
CITY-ST-ZIP	KEYSTONE HEIGHTS FL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	CASSELS, LEON H	22 NAME	
STREET ADDRESS	POST OFFICE BOX 5018 NA	23 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL	24 CITY-ST-ZIP	
TITLE	VPD	31 TITLE	☐ Change ☐ Addition
NAME	GRAY, WILLIAM B	32 NAME	
STREET ADDRESS	12980 BEAR PAW PLACE	33 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	34 CITY-ST-ZIP	
TITLE	VPD	41 TITLE	☐ Change ☐ Addition
NAME	FLYNN, JAMES R	42 NAME	
STREET ADDRESS	407 WEST GEORGIA ST	43 STREET ADDRESS	
CITY-ST-ZIP	STARKE FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	FEY, THOMAS F	52 NAME	
STREET ADDRESS	3726 NW 7TH AVENUE	53 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	COSTELLO, WILLIAM	62 NAME	
STREET ADDRESS	P.O. BOX 1179 NA	63 STREET ADDRESS	
CITY-ST-ZIP	KEYSTONE HEIGHTS FL 32656	64 CITY-ST-ZIP	T.S. 5/12/95

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)(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.

SIGNATURE: Michael E. Ricks pres/ceo 5-1-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0007178 CP