FILE NOW: FILING FEE AFTER ...AT 1ST IS $550.00

Amended

(1)

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 AUG 16 AM 10:13

SECRETARY OF STATE

DOCUMENT # M95551

1. Corporation Name
ENVIRONMENTAL PROFESSIONAL ASSOCIATES, INC.

Principal Place of Business	Mailing Address
% DAVID W. LEE 2302 S.E. 28TH ST. CAPE CORAL FL 33904	% DAVID W. LEE 2302 S.E. 28TH ST. CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/22/1988

2. Principal Place of Business (21): See attached
2a. Mailing Address (26): See attached

Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)

City & State (23)
City & State (28)

Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 65-0072167 ☐ 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LEE, DAVID W.
2302 S.E. 28TH ST.
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

81 Name: David W. Lee
82 Street Address (P.O. Box Number is Not Acceptable): P.O. Box 746 (21260 Pearl St.)
83: no mail receptacle
84 City: Alva FL 85 Zip Code: 33920

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PS	☒ DELETE	1.1 TITLE	President	☐ Change ☒ Addition
NAME	LEE, NANCY E.		1.2 NAME	David W. Lee	
STREET ADDRESS	2302 S.E. 28TH STREET		1.3 STREET ADDRESS	21260 Pearl St. (P.O. Box 746)	
CITY-ST-ZIP	CAPE CORAL FL		1.4 CITY-ST-ZIP	Alva, FL 33920.	
TITLE		☐ DELETE	2.1 TITLE	Vice President & Secretary	☐ Change ☒ Addition
NAME			2.2 NAME	Mark Ruesswick	
STREET ADDRESS			2.3 STREET ADDRESS	3347 7th Ave.	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	St. James City, FL 33956	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME	300002974423--9	
STREET ADDRESS			4.3 STREET ADDRESS	-08/31/99--01037--010	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	*****61.25 *****61.25	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

9-8-99

14. 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 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: [redacted] David W. Lee, President 7/26/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0422446

July 28, 1999

Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

RE: Document #M95551

Please make the following changes effective immediately:

Environmental Professional Associates, Inc.
C/o David W. Lee
21260 Pearl Street (no mail receptacle—see P.O.Box)
P.O. Box 746
Alva, FL 33920

Also, please note the change in officers of the Corporation.

Please make this change ASAP. We're trying to get a Contractor's license activated for use with this company. They need a current Corp. Annual Report.

If you have any questions, please feel free to call me weekdays at 941-481-5000 or home after 5:00 p.m. at 941-728-5271.

Sincerely,

Nancy E. Lee

Nancy E. Lee
Environmental Professional Associates, Inc.
P.O. Box 746
Alva, FL 33920

Enclosure

/nl:letter-temp