

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004386

FILED
Apr 13, 2005
Secretary of State

Entity Name: ENVIRONMENTAL CONSERVATION, INC.

Current Principal Place of Business:

525 SW 16TH STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

525 SW 16TH STREET
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 37-1432206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTU, JONAS
525 SW 16TH STREET
BELLE GLADE, FL 33430 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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: KWANGWARI, CHRISTOPHER
Address: 1508 SW AVE E
City-St-Zip: BELLE GLADE, FL 33430

Title: D () Delete
Name: GWEDE, CLEMENT K
Address: 12902, MAGNOLIA DRIVE
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: THICKLIN, J R
Address: P O BOX 336
City-St-Zip: BELLE GLADE, FL 33430

Title: PD () Delete
Name: GUTU, JONAS MR
Address: 525 SW 16TH STREET
City-St-Zip: BELLE GLADE, FL 33430 US

Title: C () Delete
Name: GUTU, JONAS MR
Address: 525 SW 16TH STREET
City-St-Zip: BELLE GLADE, FL 33430 US

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JONAS GUTU

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date