

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State

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05-01-2003 90381 016 ****61.25

DOCUMENT # N02000008771



1. Entity Name
**THE DEPLOYED ENVIRONMENTAL ENGINEERING PROJECTS
FOUNDATION, INC.**

Principal Place of Business
**3233 N.E. 5TH COURT
POMPANO BEACH FL 33062**

Mailing Address
**3233 N.E. 5TH COURT
POMPANO BEACH FL 33062**

55045445



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number 16-1638622	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State			
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent BORGOGNONI, GREGORY P ESQ. SUITE 200 GRAND BAY PLAZA 2865 SOUTH BAYSH ORE DRIVE MIAMI FL 33133		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE N/A
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT ERIC ENGLER 3233 NE 5TH CT POMPANO BEACH, FL 33062	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT ERIC ENGLER 3233 NE 5TH COURT POMPANO BEACH, FL 33062	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TREASURER GREGORY P. BORGOGNONI SUITE 200 GRAND BAY PLAZA 2865 SOUTH BAYSHORE DR. MIAMI, FL 33133	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TREASURER GREGORY P. BORGOGNONI SUITE 200 GRAND BAY PLAZA 2865 SOUTH BAYSHORE DR. MIAMI, FL 33133	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SECRETARY CHARLES M. MAGOWAN 2000 POWELL ST., SUITE 140 EMERYVILLE, CA 94608	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP SECRETARY CHARLES M. MAGOWAN 2000 POWELL ST., SUITE 140 EMERYVILLE, CA 94608	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ERIC ENGLER (P)**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **4-26-03** Daytime Phone # **(954) 781-0217**

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