

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 APR 21 AM 9:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N41371** (8)  
1. Corporation Name  
**THE SOUTHEASTERN REGIONAL CHAPTER, INC. OF THE SOCIETY OF ENVIRONMENTAL TOXICOLOGY AND CHEMISTRY**

Principal Place of Business Mailing Address  
**1034 NW 57TH STREET GAINESVILLE FL 32605**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>12/18/1990</b>	3a. Date of Last Report <b>06/17/1994</b>
4. FEI Number <b>59-3061390</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	<b>\$68.75 Supplemental Fee Not Required</b>
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 <b>6241 N.W. 23RD STREET</b> Suite, Apt. #, etc. <b>SUITE 500</b> City & State 22 <b>GAINESVILLE, FLORIDA</b> Zip 23 <b>32653-1500</b>	2a. Mailing Address 26 <b>6241 N.W. 23RD STREET</b> Suite, Apt. #, etc. <b>SUITE 500</b> City & State 27 <b>GAINESVILLE, FLORIDA</b> Zip 28 <b>32653-1500</b>	Country 24 <b>USA</b>	Country 29 <b>USA</b>
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9. Name and Address of Current Registered Agent  
**STEVEN H. WOLFE**  
**2600 BLAIR STONE ROAD**  
**TALLAHASSEE FL 32399**

10. Name and Address of New Registered Agent  
81 Name  
**MICHELE NARRINGTON**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**6140 EDGEWATER DRIVE**  
83  
**SUITE F**  
84 City  
**ORLANDO** FL 85 Zip Code  
**32810**

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: **MICHELE NARRINGTON, SECRETARY/TREASURER** *Michele Narrington* DATE: **2/28/95**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>WARD, G. SCOTT</b>
STREET ADDRESS	<b>106 COASTAL WAY</b>
CITY - ST - ZIP	<b>JUPITER FL</b>
TITLE	<b>D</b>
NAME	<b>JOHNSON, ISABEL C.</b>
STREET ADDRESS	<b>1034 NW 57TH STREET</b>
CITY - ST - ZIP	<b>GAINESVILLE FL</b>
TITLE	<b>STD</b>
NAME	<b>WOLFE, STEVEN H.</b>
STREET ADDRESS	<b>2600 BLAIR STONE RD.</b>
CITY - ST - ZIP	<b>TALLAHASSEE FL</b>
TITLE	<b>D</b>
NAME	<b>PISIGAN, RUDY, JR.</b>
STREET ADDRESS	<b>BOX 1703</b>
CITY - ST - ZIP	<b>GAINESVILLE FL</b>
TITLE	<b>D</b>
NAME	<b>LAUGHLIN, ROY</b>
STREET ADDRESS	<b>3225 LAKEVIEW CIR. #205</b>
CITY - ST - ZIP	<b>FT. PIERCE FL</b>
TITLE	<b>PD</b>
NAME	<b>WHITTEN, MICHAEL</b>
STREET ADDRESS	<b>1034 NW 57TH STREET</b>
CITY - ST - ZIP	<b>GAINESVILLE FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>V/D</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>DOUG JOHNSON</b>
1.3 STREET ADDRESS	<b>345 COURTLAND STREET, N.E.</b>
1.4 CITY - ST - ZIP	<b>ATLANTA, GEORGIA 30365</b>
2.1 TITLE	<b>S/T/D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>MICHELE NARRINGTON</b>
2.3 STREET ADDRESS	<b>6140 EDGEWATER DRIVE, SUITE F</b>
2.4 CITY - ST - ZIP	<b>ORLANDO, FLORIDA 32810</b>
3.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>CLAIRE MARCUSSEN</b>
3.3 STREET ADDRESS	<b>14220 WEST NEWBERRY ROAD</b>
3.4 CITY - ST - ZIP	<b>GAINESVILLE, FLORIDA 32607</b>
4.1 TITLE	<b>P/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>RUDY PISIGAN, JR.</b>
4.3 STREET ADDRESS	<b>14220 WEST NEWBERRY ROAD</b>
4.4 CITY - ST - ZIP	<b>GAINESVILLE, FLORIDA 32607</b>
5.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>ROY LAUGHLIN</b>
5.3 STREET ADDRESS	<b>2029 ROCKLEDGE DR.</b>
5.4 CITY - ST - ZIP	<b>ROCKLEDGE, FLORIDA 32955</b>
6.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>MIKE WHITTEN</b>
6.3 STREET ADDRESS	<b>6241 N.W. 23RD STREET, SUITE 500</b>
6.4 CITY - ST - ZIP	<b>GAINESVILLE, FLORIDA 32653-1500</b>

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 110.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michele Narrington* DATE: **2/28/95** (407) 2982282  
MICHELE NARRINGTON