FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

I do hereby certify that information indicated d

appears in Block 12

SIGNATURE:

this annual d

DOCUMENT # N9200000339 (3)

EARTH ACTION RECYCLERS, INC.

Principal Place of Business Mailing Address 507 N.W. 5TH AVE. 507 N.W. 5TH AVE. GAINESVILLE FL 32601 GAINESVILLE FL 32801-3218 3. Date incorporated or Qualified 3a. Date of Last Report 11/16/1992 01/31/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3163883 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has fiability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes] No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION INFORMATION SERVICES INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE FL 32301 83 City 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE 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 (96/6) (6) TITLE PD DELETE 1.1 TITLE Change Addition NAME SELWACH, RICHARD 1.2 NAME 507 N.W. 5TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME LARRICK, BRUCE 22 NAME 507 N.W. 5TH AVE. STREET ADDRESS 2.3 STREET ADDRESS GAINESVILLE FL 32601 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME TOBIN, HARRIS A 3.2 NAME 317 N.E. 1ST ST. STREET ADDRESS 3.3 STREET ADDRESS GAINESVILLE FL 32601 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME SHULTS, RICHARD 4. 2 NAME 523 NW 3 AVE STREET ADDRESS 4.3 STREET ADDRESS GAINESVILLE FL CITY-ST-ZIP 4.4 City-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME EVANGELISTA, JIM 5.2 NAME 809 NW 4 AVE STREET ADDRESS 5.3 STREET ADDRESS GAINESVILLE FI 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

e 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 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 of the corporation of the receiver or trustee empewered to execute this report as required by Chapter 617, Florida Statutes; and that my name lock 13 if granged, or on an attachment with an address.