

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N95000005768

Corporation Name

SOUTHERN ENVIRONMENTAL BUSINESS COUNCIL, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

2a. Mailing Address

4701 N FEDERAL HWY SUITE 380 B12 POMPANO BEACH FL 33064

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## Feb 22, 1999 8:00 am § Secretary of State

02-22-1999 90039 033 \*\*\*\*61.25



3. Date Incorporated or Qualifed

12/06/1995

21 614 5	MILITARY TRAIL 26 SAME	AS	ITEM 2	12/06/1995	·		
Suite, Apt.		. <u></u>	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For		
22	27			59-3361265	Not Applicable		
City & Stat	e . City & State			5. Certificate of Status Desired	\$8.75 Additional		
23 DEER	FIELD BEACIT, FL 28			3. Certificate of Status Desired	Fee Required		
Zip	Country Zip	Count	у	6. Election Campaign Financing	<b>\$5.00</b> May Be		
24 3344		30		Trust Fund Contribution	Added to Fees		
	9. Name and Address of Current Registered Agent		ar	10. Name and Address of New Registered Agent			
		8		HAEL 6. GOOKE			
NEWPORT	T. DAVID B	8	2 Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
	WBERRY ROAD	6 CARL	CARLTON, FIELDS, WARD, EMMANUEL, SMITH + CUTLER, P.A.				
GAINESVI	LLE FL 32607	ONE HARBOUR PLACE					
		8	4 City 85 Zip Code				
		TAM	TAMPA, FL FL 33602				
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 Michael G. Cooke Muhammer 1/11/199							
			ent signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12		
12.	OFFICERS AND DIRECTORS  DELETE	13.	TPO		Change Addition		
TITLE		1.1 TITLE	7.14	ETON, THOMAS H., URSGREINER	2 WUULXWARD-CU		
NAME	TURTON, THOMAS H WOODW	1.2 NAME	100	50 W. COURTNEY CAMPBELL C	AUSEWAU.		
STREET ADDRESS	3919 RIGA BLVD	1			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
CITY-ST-ZIP	TAMPA FL 33619	1.4 CITY-	ST-ZIP TAI	infa, FL 33607-6587	Change Addition		
TITLE	SD DELETE	2.1 TITLE		IRST, CRAIG, HOD ENVIRON			
NAME	CRAIGHURST, H2O ENVIROMENT	2.2 NAME	170	BI W. OHICLAND PARK BLYD	MEIDINE, INC		
STREET ADDRESS							
CITY-ST-ZIP	FT LAUDERDALE FL 33311	2. 4 CITY		KTLAUDERDALE, FL 33:	Change Addition		
TITLE	TD DELETE	3.1 TiTLE			☐ Citalige ☐ Addition		
NAME	WILLIAM ENGEL, UNIV OF FL TRE	3.2 NAME	l				
STREET ADDRESS	3900 SW 63RD ST	3.3 STRE	ET ADDRESS		, .		
CITY-ST-ZIP	GAINESVILLE FL 32608	3.4. CITY		) 875135NT-77150 - 27	☐ Change 🔀 Addition		
TITLE	DELETE	4.1 TITLE		) A TO I COMMON OF THE CALL	Charge Maddison		
NAME	* ** **	4. 2 NAM		GLIANESE, MATTHEWP. , HOLLA			
STREET ADDRESS		4		I BRICKELLAUE	3131		
CITY-ST-ZIP		4.4 CITY		ami, FL 33)3/	Change Addition		
TITLE	☐ DELETE	5.1 TITLE	1		Change Addition		
NAME		5.2 NAME		•	1		
STREET ADDRESS			ET ADDRESS				
CITY-ST-ZIP		5.4 CITY- 6.1 TITLE			Change Addition		
TITLE	☐ DELETE	6.2 NAME					
NAME							
STREET ADDRESS			ET ADDRESS				
CITY-ST-ZIP		6.4 CITY-	S1-ZIP	•			

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 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: