

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 09, 2000 8:00 am**  
**Secretary of State**

02-09-2000 90379 049 \*\*\*\*61.25

**DOCUMENT # N95000005768**

1. Entity Name

**SOUTHERN ENVIRONMENTAL BUSINESS COUNCIL, INC.**

Principal Place of Business

Mailing Address

614 SOUTH MILITARY TRAIL  
 DEERFIELD BEACH FL 33442  
 US

614 S. MILITARY TRAIL  
 DEERFIELD BEACH FL 33442-3023  
 US

00017602



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-3361265**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COOKE, MICHAEL G**  
**C/O CARLTON, FIELDS, WARD, EMMANUEL, SMITH**  
**777 SOUTH HARBOUR ISLAND BOULEVARD**  
**TAMPA FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

**FILE NOW:**  
**FEES IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete  
 NAME **TURTON, THOMAS H WOODW**  
 STREET ADDRESS **7650 W. COURTNEY CAMPBELL CSWY.**  
 CITY-ST-ZIP **TAMPA FL 33607-6587**

TITLE **PD** ☐ Change ☒ Addition  
 NAME **Freedman, Joni, ETI Enviro. Professionals,**  
 STREET ADDRESS **4902 Eisenhower Blvd., Suite 150**  
 CITY-ST-ZIP **Tampa, FL 33634**

TITLE **SD** ☒ Delete  
 NAME **HURST, CRAIG**  
 STREET ADDRESS **1061 W OAKLAND PARK BLVD**  
 CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **SD** ☐ Change ☒ Addition  
 NAME **Kowalski, Amy J., K<sup>2</sup> Engineering, Inc.**  
 STREET ADDRESS **7804 US Highway 301 South**  
 CITY-ST-ZIP **Riverview, FL 33569**

TITLE **TD** ☒ Delete  
 NAME **WILLIAM ENGEL, UNIV OF FL TRE**  
 STREET ADDRESS **3900 SW 63RD ST**  
 CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **TE** ☐ Change ☒ Addition  
 NAME **Williams, Cynthia T., Enviro Support Spec**  
 STREET ADDRESS **614 S. Military Trail**  
 CITY-ST-ZIP **Deerfield Beach, FL 33442**

TITLE **VD** ☒ Delete  
 NAME **COGLIANESE, MATTHEW P**  
 STREET ADDRESS **701 BRICKELL AVENUE**  
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **VD** ☐ Change ☒ Addition  
 NAME **Pearse, William, Polymath**  
 STREET ADDRESS **9924 Indian Key Trail**  
 CITY-ST-ZIP **Seminole, FL 33776**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Stephen H. Williams*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)