## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATION

FILED

	1998	/ DIVISION OF CO	DRPORATIO	ONS	\	00 40				
DOCUMENT # N97000007070 (2)						98 JUL - 1 AM IN: 57				
GULF ENVIRONMENTAL SERVICES, INC.						SECRE (A) TALLAHASSE	DE STA	TE Minimu		
Principal Place of Business Mailing Address						I SESTIMA SIN LANG INDSI NEUK HALII	BEHR BEIN DU	!! <b>!!!!! !!!</b> !!!! ! <b>!</b>	BH 0011 1041	
% ROSE SUNDSTROM & BENTLEY. LLP % ROSE SUNDSTROM & BEN 2548 BLAIRSTONE PINES DRIVE 2548 BLAIRSTONE PINES DRIVE TALLAHASSEE FL \$2301 TALLAHASSEE FL 32301					-  -	Date Incorporated or Qualified 12/19/1997      FEI Number		XIAn	pplied For	
						Applied for.	,		t Applicable	
21		2a. Mailing Address 26				5. Certificate of Status Desired	X	\$8.75 A		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing	_	\$5.00 A		
22   27   City & State   City & State						Trust Fund Contribution		Added to		
23	Ю	28				7. Is this nonprofit corporation a homeowners association?				
Zip	Country	Zip	Country	<u>.</u> ,		8. This corporation owes or has p			angible	
24	25		ю			Personal Property Tax due Jun	e 30. 🛚 🗓	Yes [	] No	
	9. Name and Address of Current I	Registered Agent			1	<ol><li>Name and Address of New R</li></ol>	egistered /	<b>lgent</b>		
ł	_		81	Name Ch	inn	y. Daren L.				
SGIPPY, DAREN L					ddress	(P.O. Box Number is Not Accepte	ible)			
% ROSE SUNDSTROM & BENTLEY, LLP same 2548 BLAIRSTONE PINES DRIVE					me a	as #9				
TALLAHASSEE FL 32301						·		<b>85</b> Zip 0	Code	
11 Purpupat to the provisions of Sections 617 0503 and 617 1509 Florida Statutes the above passed corners						ation submits this statement for the	FL	changing it	n registered	
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 tille if applicable. (NOTE:	Registered Age	int signature re	equired w	then reinstating)	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 12	
TITLE	Chairman/President/D	irector DELETE	1.1 TITLE	i		_		Change	☐ Addition	
NAME	J.W. French		1.2 NAME			30,000,25 -07/01/	78	][]][][-	- E	
STREET AODRESS	2548 Blairstone Pine		1.3 STREET ADDRESS			-077017	(93~~U)	. 1U.3=~U .audududu:"	194 10.00	
CITY-ST-ZIP	Tallahassee, Florida 32301		1.4 CITY-ST-ZIP				U.UU	********** Change	Addition	
TITLE NAME	Secretary/Treasurer/Director DELETE		2.1 TITLE 2.2 NAME					E ⊓ rusanifa	L. Addition	
STREET ADDRESS	Fred Edenfield, Jr. 2548 Blairstone Pines Drive		2.2 NAME 2.3 STREET ADDRESS							
CITY-ST-ZIP	Tallahassee Florida 32301		2. 4 CITY-ST-ZIP						J	
TITLE	Director Delete			-				Change	Addition	
NAME	W. Kirk Beck		3.2 NAME						\	
STREET ADDRESS	2548 Blairstone Pines Drive		3.3 STREET ADDRESS							
CITY-ST-ZIP	Tallahassee, Florida 32301		3.4. CITY-ST-ZIP							
TITLE	DELETE			4.1 TITLE			_	Change	☐ Addition	
NAME				4, 2 NAME					)	
STREET ADDRESS				4.3 STREET ADDRESS						
CITY-ST-ZIP	DELETE			T-ZIP			<u>-</u>	Change	Addition	
TITLE	·			5.1 TITLE				C) change	L. Addition	
NAME STREET ADDRESS			5.2 NAME 5.3 STREET	Anngece						
CITY-ST-ZIP			5.4 CITY-S	- 1						
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME				$\gamma I$	Cir	1000	
STREET ADDRESS			6.3 STREET	ADDRESS		~15°	H1	48		
CITY-ST-ZIP			6.4 CITY-S	T-ZIP		10	111	ų U	7110	

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 or an attachment with an address.

OLONIATURE.

941-479-8544