2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Feb 24, 2000 8:00 am Secretary of State DOCUMENT # N9800003082 1. Entity Name FLORIDA ENVIRONMENTAL RESEARCH INSTITUTE, INC. 02-24-2000 90044 042 ****61.25 Principal Place of Business Mailing Address 6406 N. QUEENSWAY DR. 701 CHANNELSIDE DR TEMPLE TERRACE FL 33617-2432 TAMPA FL 33617 2. Principal Place of Business 3. Mailing Address 801 BAYSHORE BLYD 807 BAYSHORE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Su*iTE* Suite, Apt. #, etc. SUITE 101 Applied For Çity & State 4. FEI Number City & State 59-3517698 TAMPA Ampa Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired 33611 33611 Fee Required ILLS BOROUGH HILLSBOROUG 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) BISSETT, W P 4807 BAYSHORE BLUD 6480-N-QUEENSWAY-DR SUITE 101 **TAMPA-FL-33619** Zip Code City TAMPA, FL 33611 8. The above named entity submits this statement for the purpose of charging its registered office or registered agent, or both, in the state of Florida SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Addition Change TITLE TITLE ☐ Delete GONZALEZ, HENRY NAME NAME BISSETT, W. PAUL III 2218 SHADE HILL COURT STREET ADDRESS STREET ADDRESS 6406 N. QUEENSWAY DR. CITY-ST-ZIP TAMPA, FL 33612 CITY-ST-ZIP TEMPLE TERRACE FL 33617 Addition ☐ Change ☐ Delete TITI F TITLE STD PEANY, TERRY GOLDMAN 1823 BRIGHAM ROAD Andre, Abby-NAME NAME STREET ADDRESS STREET ADDRESS 3724 HARBOR HEIGHTS DR. GATES MILLS, OH CITY-ST-ZIP CITY-ST-7IP LARGO FL 33774 310 Change ☐ Addition TITLE ☐ Delete TITLE NAME ANDRE, ABBY BISSETT, JULIET W. NAME STREET ADDRESS 6406 N. QUEENSWAY DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TEMPLE TERRACE FL 33617 Change Addition □ Delete TITLE TITLE BISSETT, W. PAUL NAME NAME STREET ADDRESS STREET ADDRESS 6406 N. QUEENSWAY DR. CITY-ST-ZIP CITY-ST-ZIP **TEMPLE TERRACE FL 33617** Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 ag ss, with all other like empowered

813-837-

WPAUL BISSETT 2/10/2000