

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # N98000003082

1. Entity Name

FLORIDA ENVIRONMENTAL RESEARCH INSTITUTE,
INC.



Principal Place of Business

4807 BAYSHORE BLVD
SUITE 101
TAMPA, FL 33611

Mailing Address

4807 BAYSHORE BLVD
SUITE 101
TAMPA, FL 33611



01272004 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3517698

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BISSETT, W P
5405 S CRESENT DR
TAMPA, FL 33611

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BISSETT, W. PAUL III
STREET ADDRESS	5405 S CRESCENT DR
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	D
NAME	RODRIGUEZ, JR, PETER
STREET ADDRESS	510 CLIFF DRIVE
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617
TITLE	D
NAME	BISSETT, JULIET W
STREET ADDRESS	5405 S CRESCENT DR
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	TD
NAME	GONZALEZ, HENRY
STREET ADDRESS	2218 SHADE HILL COURT
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	D
NAME	PEAVY, TERRY G
STREET ADDRESS	1380 ECHO GLEN P.O. BOX 369
CITY-ST-ZIP	GATES MILLS, OH 44040
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000025405
02/02/04-80104-014 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 29, 2004

Date

813-837-3324

Daytime Phone #