NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Ketherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N98000004889

ENVIRO-ENERGY RESEARCH FOUNDATION. INC

Principal Place of Business

Mailing Address

327 WHISPERING OAKS COURT SARASOTA FL 34232

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FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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<u> </u>	Principal Pl	ncipal Place of Business 2a. Mailing Address			~_	12/	3. Date Incorporated or Qualified 08/24/1998				
21	0.4- 4-4	#	Suite, Apt. #, etc.	28 1811 Englewood Rd			4. FEI Number			Knoiled For	-
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23	City & State City & State 28 ENGIEWOOD)	PL_	5. Certificate of Status Desired			Required		
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24		25	29 34223 [30	<u>u</u>	-5 <i>-71</i> -	Trust Fund Contribution		Add	led to Fees	
		9. Name and Address of Curr	rent Registered Agent		Π		10. Name and Address of Ne	w Registered	Agent		
					81	Name					
4	AVRUTIS.	THOMAS L ESQ.			82 Street Address (P.O. Box Number is Not Acceptable)						
[8	389 N. W	ASHINGTON BLVD.			Ш						
		A FL 34230			83		•				
`	J. 4 W. 10 C 1.	,			84	City		FL	85	Zip Code	
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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.											
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	<u> </u>	Signature, typed or printed name of registered a			l Agen	it alignature required t	ADDITIONS/CHANGES TO		to DIDE	TOPS IN 12	⊣ წ
12.			AND DIRECTORS	13.				OFFICE NO AL	☐ Char		(11/98)
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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:

SIGNETURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER ON DIRECTOR

941 377-3789

on commenter as of 3/8/99