

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90067 035 ***150.00

DOCUMENT # P00000027313

1. Entity Name

SB ENVIRONMENTAL OF FLORIDA, INC.

Principal Place of Business

Mailing Address

**10 COURT SQUARE
MONTGOMERY AL 36104**

**10 COURT SQUARE
MONTGOMERY AL 36104**

2. Principal Place of Business

100 LANDWARD DR
Suite, Apt. #, etc.

3. Mailing Address

100 LANDWARD DR
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

GULF SHORES AL

City & State

GULF SHORES AL

4. FEI Number

62-1815792

Applied For

Not Applicable

Zip

36542

Country

USA

Zip

36542

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **CLAUNCH, JEFF**
CITY-ST-ZIP **10 COURT SQUARE
MONTGOMERY AL 36104**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BLOUNT, WILLIAM**
CITY-ST-ZIP **10 COURT SQUARE
MONTGOMERY AL 36104**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PARRISH, C. DEREK**
CITY-ST-ZIP **10 COURT SQUARE
MONTGOMERY AL 36104**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **RICE, L. RUSHTON**
CITY-ST-ZIP **10 COURT SQUARE
MONTGOMERY AL 36104**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D/P**
STREET ADDRESS **19010 FAIRFIELD DR**
CITY-ST-ZIP **FAIRHOPE AL 36532**

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

TITLE ☒ Change ☐ Addition
NAME **D/P**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **D/S/T**
STREET ADDRESS
CITY-ST-ZIP

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

3/27/01

Daytime Phone #

CR2E034 (10/00)