

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054127

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: ENVIRONMENTAL LAND SERVICES OF FLAGLER COUNTY, INC.

## Current Principal Place of Business:

3601 N. U.S. HIGHWAY 1  
BUNNELL, FL 32110

## New Principal Place of Business:

2550 NORTH STATE STREET  
SUITE #7  
BUNNELL, FL 32110

## Current Mailing Address:

3601 N. U.S. HIGHWAY 1  
BUNNELL, FL 32110

## New Mailing Address:

2550 NORTH STATE STREET  
SUITE #7  
BUNNELL, FL 32110

FEI Number: 20-1753738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOWELL, SIDNEY M ESQ  
1100 E. MOODY BLVD.  
BUNNELL, FL 32110 US

## Name and Address of New Registered Agent:

NANCY, MOREA  
2550 NORTH STATE STREET  
BUNNELL, FL 32110 US

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: NANCY MOREA

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MOREA, MICHAEL F  
Address: 18 CORTES CT.  
City-St-Zip: PALM COAST, FL 32137

Title: D ( ) Delete  
Name: MOREA, NANCY  
Address: 18 CORTES CT.  
City-St-Zip: PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MOREA, MICHAEL F  
Address: 18 CORTES CT.  
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change ( ) Addition  
Name: MOREA, NANCY  
Address: 18 CORTES CT.  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY MOREA

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date