

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P05815**

1. Entity Name

SEVERN TRENT ENVIRONMENTAL SERVICES, INC.**FILED**
Mar 02, 2001 8:00 am
Secretary of State

03-02-2001 90078 041 ***158.75

Principal Place of Business

Mailing Address

**16337 PARK ROW
HOUSTON TX 77084
US****610 SYCAMORE STREET
#140
CELEBRATION FL 34747
US****A0027260**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

62-1168252

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOYER, GARY
610 SYCAMORE STREET
#140
CELEBRATION FL 34747**

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
COOK, WILLIAM R
FOUNDERS BLDG., #300, 580 VIRGINIA DRIVE
FT. WASHINGTON PA 19034** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GRAZIANO, LEONARD F
FOUNDERS BLDG., #300, 580 VIRGINIA DRIVE
FT. WASHINGTON PA 19034** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Graziano, Leonard F. ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFOS
WATEL, MEG M
16337 PARK ROW
HOUSTON TX 77084** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
BURROWES, IVAN S
16337 PARK ROW
HOUSTON TX 77084** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ALLEN, GERALD S
4837 SWIFT ROAD, STE. 100
SARASOTA FL 34231** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
KAAS, DANA A
FOUNDERS BLDG., #300, 580 VIRGINIA DRIVE
FT. WASHINGTON PA 19034** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

Date

Daytime Phone #

CR2E034 (10/00)