

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

Apr 02 1996 8:00 am  
Secretary of State

DOCUMENT # P17472 (2)

1. Corporation Name

KIMMINS ENVIRONMENTAL SERVICE CORP.

Principal Place of Business

1501 SECOND AVENUE, EAST  
TAMPA FL 33605-5005

Mailing Address

1501 SECOND AVENUE, EAST  
TAMPA FL 33605-5005

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

WILLIAMS, JOSEPH M  
1501 E ~~SECONA~~ AVE  
TAMPA FL 33605

SECOND

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

12/31/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2763096

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

SIGNATURE

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

(NOTE: Registered Agent signature required when filing first

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME WILLIAMS, FRANCIS M  
STREET ADDRESS 1110 CULBREATH ISLES DR.  
CITY - ST - ZIP TAMPA FL

TITLE ST ☐ DELETE

NAME WILLIAMS, JOSEPH M.  
STREET ADDRESS 1501 2ND AVENUE  
CITY - ST - ZIP TAMPA FL

TITLE D ☐ DELETE

NAME GOLD, MICHAEL  
STREET ADDRESS 256 3RD ST.  
CITY - ST - ZIP NIAGRA FALLS NY

TITLE D ☐ DELETE

NAME CHANDLER, GEORGE A  
STREET ADDRESS 927 W SHAKER CIRCLE  
CITY - ST - ZIP MEQUON WI

TITLE VPCO ☐ DELETE

NAME DOMINIAK, NORMAN S  
STREET ADDRESS 1501 2ND AVE  
CITY - ST - ZIP TAMPA FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/31/96 (813) 248-3878

Date

Daytime Phone

CR2E034 (12/95)