


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P20130		
1. Entity Name VOLKERT ENVIRONMENTAL GROUP, INC.		
Principal Place of Business 3809 MOFFETT ROAD (36618) P O BOX 7434 MOBILE, AL 36670	Mailing Address 3809 MOFFETT ROAD (36618) P O BOX 7434 MOBILE, AL 36670	



03132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-0919149	Applied For Not Applicable
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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 ROAD PLANTATION, FL 33324	

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KING, T. KEITH 3809 MOFFETT ROAD MOBILE, AL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD ZOGBY, THOMAS A. 3809 MOFFETT ROAD MOBILE, AL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD BEASLEY, MALCOLM N 3809 MOFFETT ROAD MOBILE, AL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS HANCKEN, MARGARET C. 3809 MOFFETT ROAD MOBILE, AL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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03/28/06-80003-003 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret Hancken MARGARET HANCKEN 3/13/06 251 342
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #