

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 22, 2003 8:00 am
Secretary of State

08-22-2003 90107 011 ***550.00

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DOCUMENT # P25239

1. Entity Name

ON-SITE ANALYSIS, INC.

*NC
30502
K*



Principal Place of Business
**7108 FAIRWAY DR.
STE 130
PALM BEACH GARDENS FL 33418-3757
US**

Mailing Address
**7108 FAIRWAY DR.
STE 130
PALM BEACH GARDENS FL 33418-3757
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **84-1027821**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARRIS, MICHAEL D
1645 PALM BEACH LAKES BLVD., STE 550
WEST PALM BEACH FL 33401**

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	D MENNEN, G. JEFF	<input type="checkbox"/> Delete
STREET ADDRESS	258 HANOVER RD	
CITY-ST-ZIP	FLORHAM PARK NJ 07932	
TITLE NAME	CPD WILLIS, WILLIAM C	<input type="checkbox"/> Delete
STREET ADDRESS	7108 FAIRWAY DR #200	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	
TITLE NAME	D BURD, RONALD P	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	444 DEVEREUX DR	
CITY-ST-ZIP	VILLANOVA PA 19085	
TITLE NAME	D VICKAR, L. KERRY	<input type="checkbox"/> Delete
STREET ADDRESS	701 RICKERT ST	
CITY-ST-ZIP	STATESVILLE NC 28677	
TITLE NAME	D NATAN, DAVID	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	7108 FAIRWAY DR STE 200	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418-3757	
TITLE NAME	D PIETRANGELO, MICHAEL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	6410 POPLAR AVE., STE 190	
CITY-ST-ZIP	MEMPHIS TX 38119	

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

Title: President & CEO

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/20/03 561-775-5756

W. Willis, Jr.

President & CEO

CR2E034 (4/03)