SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $370)

PROFIT CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 JUL -5 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P27481 (1)

1. Corporation Name
PICKERING ENVIRONMENTAL CONSULTANTS, INC.

Principal Place of Business	Mailing Address
1750 MADISON AVE. STE. 500 MEMPHIS TN 38104	1750 MADISON AVE. STE. 500 MEMPHIS TN 38104

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/22/1989
3a. Date of Last Report: 03/25/1994
4. FEI Number: 62-1402508 ☐ 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 taken, for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 — Country 25	Zip 29 — Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 TITLE	PRESIDENT ☑ Change ☐ Addition
NAME	WEISS, IRVING N.	1 NAME	LEE, KENNETH R.
STREET ADDRESS	6637 CONIFER COVE	1 STREET ADDRESS	2295 CLARKE LANDING COVE NORTH
CITY-ST-ZIP	MEMPHIS TN	1 CITY-ST-ZIP	CORDOVA TN
TITLE	VS	2 TITLE	☐ Change ☐ Addition
NAME	BRYANT, THOMAS S.	2 NAME	
STREET ADDRESS	8299 HICKORY GLEN	2 STREET ADDRESS	
CITY-ST-ZIP	GERMANTOWN TN	2 CITY-ST-ZIP	
TITLE	V	3 TITLE	VICE PRESIDENT ☑ Change ☐ Addition
NAME	LEE, KENNETH R.	3 NAME	WEISS, IRVING N.
STREET ADDRESS	2285 CLARKE LANDING COVE NORTH	3 STREET ADDRESS	6637 Conifer Cove
CITY-ST-ZIP	CORDOVA TN	3 CITY-ST-ZIP	MEMPHIS TN
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE: KEN LEE, PRESIDENT 6/20/95 (901)726-0810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

CR2E034 (3/95)