

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Aug 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P27481 (1)
1. Corporation Name
PICKERING ENVIRONMENTAL CONSULTANTS, INC.

Principal Place of Business 1750 MADISON AVE. STE. 500 MEMPHIS TN 38104	Mailing Address 1750 MADISON AVE. STE. 500 MEMPHIS TN 38104
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/22/1989	3a. Date of Last Report 02/27/1996
				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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Secretary
NAME	LEE, KENNETH R.	1.2 NAME	Johnson, Daniel
STREET ADDRESS	2285 CLARKE LANDING COVE N.	1.3 STREET ADDRESS	1750 Madison Ave
CITY-ST-ZIP	CORDOVA TN	1.4 CITY-ST-ZIP	Memphis TN 38104
TITLE	VS	2.1 TITLE	President
NAME	BRYANT, THOMAS S.	2.2 NAME	Bryant, Thomas S
STREET ADDRESS	8299 HICKORY GLEN	2.3 STREET ADDRESS	8299 Hickory Glen
CITY-ST-ZIP	GERMANTOWN TN	2.4 CITY-ST-ZIP	Germantown TN
TITLE		3.1 TITLE	Director
NAME		3.2 NAME	Whitten, Nathaniel
STREET ADDRESS		3.3 STREET ADDRESS	333 N. Main Plaza
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Jackson MS 39206
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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:

Thomas S. Bryant

Thomas S. Bryant

7.28.97

901.726.0810

CR2E034 (4/97)