FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 12:14

DOCUMENT # **P30371** **(9)**

1. Corporation Name
ECOGARD, INC.

Principal Place of Business	Mailing Address
3499 DABNEY DR P.O. BOX 14000 LEXINGTON FL 40512	3499 DABNEY DR P.O. BOX 14000 LEXINGTON FL 40512

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/31/1990
3a. Date of Last Report: 03/30/1994

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 61-1179404 ☐ 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

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	BARR, JOHN D.	12 NAME		
STREET ADDRESS	901 CHINOE RD.	13 STREET ADDRESS		
CITY-ST-ZIP	LEXINGTON KY	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE	President D	☒ Change ☐ Addition
NAME	HUSTON, JAMES M.	22 NAME		
STREET ADDRESS	2029 IMPALA LANE	23 STREET ADDRESS		
CITY ST ZIP	LEXINGTON KY	24 CITY ST ZIP		
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	DEATON, MICHEAL F.	32 NAME		
STREET ADDRESS	301 E MAIN ST #300	33 STREET ADDRESS		
CITY-ST ZIP	LEXINGTON KY	34 CITY ST ZIP		
TITLE	T	41 TITLE		☐ Change ☐ Addition
NAME	HUFFMAN, DANIEL B	42 NAME		
STREET ADDRESS	1000 ASHLAND DR	43 STREET ADDRESS		
CITY ST ZIP	RUSSELL NY	44 CITY ST ZIP		
TITLE	VP	51 TITLE		☐ Change ☐ Addition
NAME	ROCCO, JAMES V.	52 NAME		
STREET ADDRESS	3499 DABNEY DR	53 STREET ADDRESS		
CITY ST ZIP	LEXINGTON KY	54 CITY ST ZIP		
TITLE	AST	61 TITLE		☐ Change ☐ Addition
NAME	ELLIS, CHARLES D.	62 NAME		
STREET ADDRESS	1201 MEDELLIN COURT	63 STREET ADDRESS		
CITY ST ZIP	LEXINGTON KY	64 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)(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: Charles A. Ellis — Charles D. Ellis — 3-22-95 — (606)357-7484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #
Assistant Treasurer

0479342 FP

P30371

ECOGARD, INC.
PO BOX 14000
LEXINGTON, KY 40512

March 23, 1995

Florida Department of State
Division of Corporations
Annual Reports Section
PO B ox 1500
Tallahassee, FL 32302-1500

1995 CORPORATE ANNUAL REPORT

Enclosed is the taxpayer's 1995 Corporation Annual Report. Also enclosed is a check in the amount of $200.00 in payment of the filing fee.

Lois Murphy

Lois A. Murphy
State Income Tax

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