## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 26, 2002 8:00 am DOCUMENT # P31357 **Secretary of State** 1. Entity Name 02-26-2002 90022 050 \*\*\*150 00 DIVERSIFIED ENVIRONMENTAL MANAGEMENT CO. Principal Place of Business Mailing Address P.O.BOX 1510 2 RIVERPLACE. SUITE 200 ATTN: TAX DEPT. DAYTON OH 45405 DAYTON OH 45401 U\$ US 3. Mailing Address 2. Principal Place of Business 2 RIVERPLACE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 200 Applied For 4. FEI Number City & State 0410 City & State 31-1305534 DAYTUN Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 45405 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. SIGNATURE (NOTF: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. CR2E034 (9/01) Addition TITLE Change ☐ Delete TITLE NAME NAME GEHRICH, ROSALIE STREET ADDRESS STREET ADDRESS 375 COPPER BEACH CT CITY-ST-ZIP CITY-ST-ZIP **CENTERVILLE OH 45459** ☐ Change ☐ Addition TITLE □ Delete D NAME NAME RUSSELL, RICHARD STREET ADDRESS STREET ADDRESS 9401 DAVID ANDREW WAY CITY-ST-ZIP CITY-ST-ZIP **CENTERVILLE OH 45458** ☐ Addition Change ☐ Delete TITLE TITLE CD NAME NAME DANIS, THOMAS J STREET ADDRESS STREET ADDRESS 2 RIVERPLACE, SUITE 400 CITY-ST-ZIP CITY-ST-ZIP DAYTON OH 45405 PRESIDENT, SECRUTARY, DIRECTUR 7g Change Addition ☐ Delete TITLE PS() TITLE NAME MCCANN, GREGORY NAME STREET ADDRESS STREET ADDRESS 2 RIVERPLACE, SUITE 400 CITY-ST-ZIP CITY-ST-7IP **DAYTON OH 45405** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME

13. 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 11 or Block 12 if changed, or on an attaehment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED