

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2002 8:00 am**  
**Secretary of State**

04-28-2002 90727 001 \*\*\*300.00

**DOCUMENT # P93000051115**

1. Entity Name  
**ROCKFILL ASSOCIATES, INC.**

Principal Place of Business

**2700 ROCKFILL RD  
 FT. MYERS FL 33916  
 US**

Mailing Address

**P.O. BOX 27  
 FT. MYERS FL 33902-0027  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0437217**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HIMSCHOOT, ROBERT D  
 2700 ROCKFILL RD.  
 FT. MYERS FL 33916**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPST  
 HIMSCHOOT, ROBERT D  
 2700 ROCKFILL RD  
 FT. MYERS FL 33916** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PRESIDENT  
 ROBERT D. HIMSHOOT  
 2700 ROCKFILL RD  
 FT. MYERS, FL. 33916** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 HIMSCHOOT, ROBERT D  
 2700 ROCKFILL RD  
 FT. MYERS FL 33916** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VICE PRESIDENT  
 DAVID W. BROOKS  
 2700 ROCKFILL RD.  
 FT. MYERS, FL 33916** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**P  
 BROOKS, DAVID  
 2700 ROCKFILL RD.  
 FT. MYERS FL 33916** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VICE PRESIDENT  
 MICHAEL-D. HIMSHOOT  
 2700 ROCKFILL RD.  
 FT. MYERS, FL 33916** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VICE PRESIDENT  
 RICHARD N. MILLSPAUGH  
 2700 ROCKFILL RD.  
 FT. MYERS, FL 33916** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

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 attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/02

239-332-1986

Date

Daytime Phone #

CR2E034 (9/01)

**RESOLUTION ADOPTED BY INCORPORATION DIRECTOR**

**OF**

**ROCKFILL ASSOCIATES, INC.**

**d/b/a CREWS ENVIRONMENTAL**

The undersigned, being the Chairman of the Board of Directors of Rockfill Associates, Inc., d/b/a Crews Environmental, hereby adopts the following resolution:

(1) RESOLVED, that Robert D. Himschoot is the vice president of the Corporation and is hereby appointed as the qualifying agent for the Corporation for the purpose of Collier County/City of Naples/City of Marco Island licensing.

Dated: August 18, 1999 at 11:30 o'clock a. m.



E. Bruce Strayhorn, Chairman of  
Board of Directors