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 FEB 15 PM 3:04

DOCUMENT # P93000075163 (4)

1. Corporate Name
FLORIDA ENVIRONMENTAL NETWORK, INC.

Principal Place of Business
310 W COLLEGE AVE
TALLAHASSEE FL 32301

Mailing Address
310 W COLLEGE AVE
TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporation or Qualified: 10/29/1993
3a. Date of Last Report: 05/10/1994

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: 59-3210381 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

MCCORMACK, FRED A
310 W COLLEGE AVE
TALLAHASSEE FL 32301

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 (and/or printed name of registered agent if current is due/paid) NOTE: Registered Agent signature required above/below/left DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LITTLEJOHN, CHARLES B
STREET ADDRESS	310 W COLLEGE AVE
CITY-ST-ZIP	TALLAHASSEE FL 32301
TITLE	D
NAME	LONG, LINDA R
STREET ADDRESS	310 W COLLEGE AVE
CITY-ST-ZIP	TALLAHASSEE FL 32301
TITLE	D
NAME	BARTON, COLLEEN B
STREET ADDRESS	857 E PARK AVE
CITY-ST-ZIP	TALLAHASSEE FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is substantially identical and does not qualify for the exemption set forth in Section 119.07(3)(i), Florida Statutes. Further, I certify that the information indicated on this annual report or supplemental annual report is true and complete and that my signature at the bottom of this report is my official signature. I am an officer or director of the corporation or the owner or limited employee authorized to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or is added to them with an address.

SIGNATURE: Linda Long Linda Long 2-13-95 904-222-7535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0026570 CP