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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000076844 (8)

BIG BEND ENVIRONMENTAL SERVICES, INC.

Principal Place of Business Mailing Address 2012 NORTH POINT BLVD. P. O. BOX 14678 SLITTE F TALLAHASSEE FL 32317-4678 TALLAHASSEE FL 32308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/05/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 4025 Northwest Passage 59-3213948 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired M Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be TAllahassee Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WATTS, TOMMY F B1 Watts, Tommy F. 2012 NORTH POINT BLVD. Street Address (P.O. Box Number is Not Acceptable)
4025 Northwest TASS 82 SUITE F TALLAHASSEE FL 32308 83 84 City Zip Code 32303 <u>IA l</u>la hassee 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 reinstaling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 1.1 TITLE TITLE TOMMY F WATTS NAME 1.2 NAME 4025 Northwest Passage 2012 NORTH POINT BLVD., SUITE F STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE TITLE 2.1 TITLE WOODARD, ROBERT G NAME 2.2 NAME 4025 Northwest Passage 2012 NORTH POINT BLVD. 2.3 STREET ADDRESS STREET ADDRESS TAllahassee, FL 32303 TALLAHASSEE FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAMÉ **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS

14. 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 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, 30 or an attachment with an effect of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

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Apr 15 1998 8:00am

Secretary of State

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