## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1. Corporation Name P93000084534 (5)					
ENVIRO-SENSE PROPERTY MANAGEMENT I, INC.			•		
ENVINC	PSENSE PROPERTI MAN	IAGEMENT I, INC.			18141 B1381 S4186 41111 B161 1661
Principal Place	a of Business	Mailing Address		<u> </u>	3841 81884 81188 11111 8131 1881
,					
8252 31 ST TERRACE N. ST PETERSBURG FL 33710		8252 31ST TERRACE N. ST PETERSBURG FL 33710			
US		U\$		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				12/10/1993	
<del></del>	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3312747	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Ziji	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr			10. Name and Address of New Registers	
LIABTY, SCOTT E:			81 Name	ARELL A. CORD	•
8252 31ST TERRACE N.			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	<u> </u>
8T. PETERSBURG FL 33710			02 Street Auti	riess (F.O. Box Number is Not Acceptable)	
•			88	CANE	
			84 City	21116	ng Zin Code
			OH City	F	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 objections of Section 607.0505. Florida Statutes.					
agent. I am familiar with, and accept the objections of Section 607.0505, Florida Statules.					
SIGNATURE 5.9.28					
	Signature, typed or crited name of region term		NOTE Registered Agent's gnature reque	· · · · · · · · · · · · · · · · · · ·	
12.	<del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D COOD KADEN A	☐ DELETE	1.1 TITLE		Change Addition
NAME	CORR, KAREN A		1.2 NAME		
STREET ADDRESS	8252 31ST TERRACE N. ST PETERSBURG FL		1.3 STRFET ADDRESS		
CITY-ST-ZIP TITLE	OI FETENSBURG FL	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME		רַ טננוונ	2.2 NAME		C Cuange C Addition
STREET ADDRESS			2.3 STREET ADDRESS		
City-ST-ZIP			2.4 CITY-ST-ZIP		!
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAMF		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		The state of the s	6.4 CITY - ST - ZIP	0	

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, or on an attachment with an address.

**FILED** 

May 19 1998 8:00am

Secretary of State