

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION:
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
TAMARA H. MONTGOMERY
Secretary of State
DIVISION OF CORPORATIONS

95 MAY -1 AM 4:27

DOCUMENT # P94000086452 (7)

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ECOGUARD CORPORATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business
800 LAUREL OAK DRIVE
SUITE 300
NAPLES FL 33963

Mailing Address
800 LAUREL OAK DRIVE
SUITE 300
NAPLES FL 33963

3. Date Incorporated (or Creation)
11/18/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0537088

Applied For
☐ Not Applicable

21. State of Incorporation

26. State of Mailing Address

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

22. City & State

27. City & State

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

23. City & State

28. City & State

8. This corporation has liability for intangible tax under the 1993 Florida Statutes ☐ Yes ☒ No

24. City & State

25. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LUTHER, ROBERT J II
800 LAUREL OAK DRIVE
SUITE 300
NAPLES FL 33963**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code

11. Pursuant to the provisions of Sections 607 (2)(b), and 607 (2)(b) 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 provisions of Sections 607 (2)(b), Florida Statutes.

SIGNATURE

Signature of Current Registered Agent

Signature of New Registered Agent

File

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)	
NAME	D	NAME	☐ Change ☐ Addition
STREET ADDRESS	LUTHER, ROBERT J II	NAME	
CITY & STATE	800 LAUREL OAK DRIVE, SUITE 300	STREET ADDRESS	
	NAPLES FL	CITY & STATE	
NAME	D	NAME	☐ Change ☐ Addition
STREET ADDRESS	HIGH, TOM M	STREET ADDRESS	
CITY & STATE	800 LAUREL OAK DRIVE, SUITE 300	CITY & STATE	
	NAPLES FL		
NAME	D	NAME	☐ Change ☐ Addition
STREET ADDRESS	BARTON, JERY E	STREET ADDRESS	
CITY & STATE	800 LAUREL OAK DRIVE, SUITE 300	CITY & STATE	
	NAPLES FL		
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY & STATE		CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is true and correct and equally for the information stated in Section 119 (2)(b) Florida Statutes. I further certify that the information stated in this annual report is true and correct 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 incorporator or shareholder of the corporation and that I am authorized to make this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or on any additional information filed.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95 (813) 592-7979