SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1995.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1996



Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000091935 (4)

WESTCOAST BROKERAGE ENVIRONMENTAL CONSULTANTS, I

SIGNATURE:

FILED

96 DEC -2 AMI1: 22

SECRETARY OF STATE TALLAHASSEE FLORIDA



| Timelpart lace of business   |  | Mailing Address                                |   |  |   |
|--|--|--|---|--|---|
| 128 SPRINGLAKE HIGHWAY<br>BROOKSVILLE FL 34602   |  | 123 SPRINGLAKE HIGHWAY<br>BROOKSVILLE FL 34502 |   | REINSTATEM   | ENT 96 90                                 |
|  |  |  |   | <ol> <li>Date Incorporated or Qualified</li> <li>12/20/1994</li> </ol> | 3a. Date of Last Report<br>05/01/1995     |
| Principal Place of Business     Za. Mailing Address  |  |  | cou Lan   | 4. FEI Number  | Applied For                               |
|  | lightsey lane                                | 26 621 UGHT                                    | SEY LAN   | APPLIED FOR  | Not Applicable                            |
| Suite, Apt.  |  | Suite, Apt. #, etc.                            |   | 5. Certificate of Status Desired                                       | \$8.75 Additional Fee Required            |
| City & State   |  | City & State                                   | FL  | Election Campaign Financing     Trust Fund Contribution                | \$5.00 May Be Added to Fees               |
| 24 335C  | tol Country 25 HILLSBOROLGH                  | 29 335A9 3                                     | O HILLS BORDL   | 8. This corporation has liability for i                                | intangible tax under s. 199.032.  Yes No  |
| Name and Address of Current Registered Agent   |  |  | 10. Name and Address of New Re                        | 10. Name and Address of New Registered Agent                           |   |
| CORPORATION SERVICE COMPANY  |  |  |   | MS JULIEA '  | 7-AKER                                    |
| 1201 HAYS ST.  |  |  | 82 Street Address (P.O. Box Number is Not Acceptable) |  |   |
| TALLAHASSEE FL 32301   |  |  | 621 CIGHTGEM LANE                                     |  |   |
|  |  |  | 83  | ·  |   |
| 84 City LUTZ FL 85 ZipCode 33540   |  |  |   |  |   |
| 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 Signal box / poet or period name of registered agent and life if applicable (NOTE: Projected Agent signature required when constating)  DATE  DATE    NOTE: Projected Agent signature required when constating)  |  |  |   |  |   |
| 12.  | OFFICERS AND                                 |  | 13.   | ADDITIONS/CHANGES TO OFFICE  | ERS AND DIRECTORS IN 12                   |
| TITLE  | S  | DELETE   | 1.1 TITLE   | 1.0011.01001.01001.010   | Change Addition                           |
| NAME _   | BAKER, ARTHUR C                              |  | 1.2 NAME  | 2000020  | )22 <b>282</b> ——2                        |
| STREET ADDRESS   | ADD ODDING AND INCIDENS                      |  | 1.3 STREET ADDRESS                                    | -12/06/9601069001  |   |
| CITY-ST-ZIP  | BROOKSVILLE FL 34602                         |  | 1.4 CITY - ST - ZIP                                   | ****37   | '5.00 ****375.00                          |
| TITLE  | Р  | DELETE   | 2.1 TITLE   |  | Change Addition                           |
| NAME   | Baker, Julie A                               |  | 22 NAME   |  |   |
| STREET ADDRESS   | 128 SPRINGLAKE HIGHWAY                       |  | 2.3 STREET ADDRESS                                    | 2000020  | 0222822                                   |
| CITY - ST - ZIP  | BROOKSVILLE FL 34602                         |  | 2.4 CITY - ST - ZIP                                   |  | /9601069002                               |
| TITLE  |  | DELETE   | 3.1 TITLE   | <b>米米米米米</b>   | 8.75 ************************************ |
| KAME   |  |  | 32 NAME   |  |   |
| STREET ADDRESS   |  |  | 3.3 STREET ADDRESS                                    |  |   |
| CITY - ST - ZIP  | <u>.                                    </u> |  | 3.4. CITY-ST-ZIP                                      |  |   |
| TITLE  |  | L DELETE                                       | 4.1 TITLE   |  | Change Addition                           |
| KAME   |  |  | 4.2 HAME  |  |   |
| STREET ADDRESS   |  |  | 43 STREET ADDRESS                                     |  |   |
| CITY-ST-ZIP  | <del> </del>                                 | THE SELECT                                     | 4.4 CITY-ST-ZIP                                       |  |   |
| TITLE  |  | ☐ DELETE                                       | 5.1 TITLE   |  | Change Addition                           |
| NAME   |  |  | 5.2 NAME  |  | •   |
| STREET ADDRESS   |  |  | 53 STREET ADDRESS                                     |  | •   |
| TITLE  |  | DELETE   | 5.4 CITY+ST-ZIP<br>6.1 TITLE                          | <del></del>  | Channa Adams                              |
| HAME   |  | Lad Vettile                                    | 62 NAME   | 2  | Change Addition                           |
| STREET ADDRESS   |  |  | 63 STREET ADDRESS                                     |  |   |
| CITY-ST-ZIP  |  |  | 6.4 CITY - ST - ZIP                                   | 1.5<br>114   |   |
| 14. I do herob   | y certify that the information supplied s    | with this filing is voluntarily furni-         | shed and does not a                                   |  | 19.07(3)(k), Florida Statutes, I          |
| 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 offect as if made under eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. |  |  |   |  |   |