

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P94000093026 (0)**

1. Corporation Name

**SPECIALIZED ENVIRONMENTAL SYSTEMS, INC.**



Principal Place of Business

Mailing Address

757 HIGHWAY 98 E  
14-301  
DESTIN FL 32541

757 HIGHWAY 98 E  
14-301  
DESTIN FL 32541

3. Date Incorporated or Qualified

12/22/1994

3a. Date of Last Report

08/25/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3297127

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

10. Name and Address of New Registered Agent

EBB, PETER B  
101 EGLIN PARKWAY N.E., #350  
FORT WALTON BEACH FL 32548

81 Name

PETER B. EBB

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

757 HIGHWAY 98 E

83

UNIT 14-301

84 City

DESTIN, FL

FL

85 Zip Code

32541

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  DELETE  
NAME EBB, PETER  
STREET ADDRESS 757 HIGHWAY 98 E  
CITY-ST-ZIP DESTIN FL 32541

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VP  DELETE  
NAME TODD DANIEL  
STREET ADDRESS 1610 WORCHESTER RD # 634A  
CITY-ST-ZIP FEAMINGHAM MA 01701

2.1 TITLE VP  Change  Addition  
2.2 NAME TOPP DANIEL  
2.3 STREET ADDRESS 11 SWANG DRIVE  
2.4 CITY-ST-ZIP FRAMINGHAM MA 01701

TITLE D  DELETE  
NAME REOCCO, FRANK  
STREET ADDRESS 2475 WHITNEY AVE.  
CITY-ST-ZIP HAMDEM CT 06518

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME CWERTNIOWIEZ, TED  
STREET ADDRESS 2475 WHITNEY AVE.  
CITY-ST-ZIP HAMDEM CT 06518

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ~~THOMAS MILLER~~  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME THOMAS MILLER, RICHARD W.  
5.3 STREET ADDRESS 100 CLOCK SHOP DRIVE  
5.4 CITY-ST-ZIP BERLIN, CT 06037

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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.

SIGNATURE:

*Peter B. Ebb* PETER B. EBB  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 25, 1996  
Date

904-650-1008  
Daytime Phone #

CR2E034 (12/95)