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Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000004588 (6)

1. Corporation Name
ENVIROLOGICS, INC.

Principal Place of Business
975 HIGHLANDS BLVD.
PALM HARBOR FL 34684

Mailing Address
975 HIGHLANDS BLVD.
PALM HARBOR FL 34684-3023



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MORRIS, JACKSON L
3116 W. NORTH 'A' ST.
TAMPA FL 33609

3. Date Incorporated or Qualified

01/17/1995

3a. Date of Last Report

07/16/1996

4. FEI Number

59-3343008

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Andrew F. Tangeman

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

975 Highlands Blvd.

83

84 City

Palm Harbor

FL

85 Zip Code

34684

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

Andrew F. Tangeman

Signature typed or printed name of registered agent and use if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	WHITMAN, JOHN V JR.	
STREET ADDRESS	226 S. BROAD ST.	
CITY- ST- ZIP	CAIRO GA 31728	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	TANGEMAN, ANDREW F	
STREET ADDRESS	975 HIGHLANDS BLVD.	
CITY- ST- ZIP	PALM HARBOR FL 34684	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MORRIS, JACKSON L	
STREET ADDRESS	3116 W. NORTH A ST.	
CITY- ST- ZIP	TAMPA FL 33609	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ANDERSON, WAYNE I	
STREET ADDRESS	407 KEENE RD.	
CITY- ST- ZIP	APOPKA FL 32704	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GRANT, J. STUART	
STREET ADDRESS	835 N. CLEARWATER/LERG. RD.	
CITY- ST- ZIP	LARGO FL 34640	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MALLET, RONALD L	
STREET ADDRESS	4502 IRVINGTON AVE.	
CITY- ST- ZIP	JACKSONVILLE FL 32210	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Andrew F. Tangeman	
1.3 STREET ADDRESS	975 Highlands Blvd.	
1.4 CITY- ST- ZIP	Palm Harbor, FL. 34684	
2.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Loren A. Schultz	
2.3 STREET ADDRESS	7225 ST. ANN'S CT.	
2.4 CITY- ST- ZIP	FT. MEYERS, FL. 33908	
3.1 TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Dr. Jesse Houdastock	
3.3 STREET ADDRESS	7721 Wexford Way	
3.4 CITY- ST- ZIP	Port. St. Lucie, FL. 34986	
4.1 TITLE	Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Robert O. Ness	
4.3 STREET ADDRESS	3129 Lee Warren Ave	
4.4 CITY- ST- ZIP	Lakeland, FL. 33803	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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, unchanged, or on an attachment with an address.

SIGNATURE:

Andrew F. Tangeman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-97 (813) 785-5587

Date

Daytime Phone #

CR2ED34 (9/96)