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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

P95000017497 (5) DOCUMENT #

ENVIRONMENTAL REMEDIATION CONSULTING SERVICES, I **NCORPORATED**

Principal Place of Business

Mailing Address

FILED Feb 17 1998 8:00am Secretary of State



3780 CREEK HOLLOW LANE MIDDLEBURG FL 32068 US		3780 CREEK HOLLOW LANE MIDDLEBURG FL 32068 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				03/02/1995	
21 3717		2a. Mailing Address 26 3717 Washerd	Hollow Rol E.	4. FEI Number . 59-3303122	Applied For Not Applicable
Suite, Apt.	#, OIC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	~.	8. Election Campaign Financing	\$5.00 May Be
	conville, FL	28 Jacksonuill		Trust Fund Contribution	Added to Fees
Zip 24 3 2 2 2 2 3	Country	Zip 29 32224	Country	8. This corporation owes or has paid the of Personal Property Tax due June 30.	current year Intangible X Yes No
24 2 0 0 0 0	p. Name and Address of Curren		30 327	10. Name and Address of New Registere	
НО	OVER, REYNOLD N	R REYNOLD N.			
3780 CREEK HOLLOW LANE				SEYNOLD Nose (P.O. Box Number, is Not Acceptable)	
MIDDLEBURG FL 32088 3717 Wextord Hollan Road E.					
			B3		
	_		84 City-	lea 111m F	85 Zip Code 32.22.4
11 Pursuant I	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statute	s the above-named corpo	ration submits this statement for the purpose	of changing its registered
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 (prhiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Keinbel N. F	boover	2.5.98		
	Signature, type for printed name of registered age: OFFICERS AND		Registered Agent & gnature require	· ····································	UD DIDECTORS IN 40
TITLE	OFFICERS AINL	DELETE	13. 1) TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	HOOVER, REYNOLD N		1.2 NAME		
STREET ADDRESS	3780 CREEK HOLLOW LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIDDLEBURG FL		1.4 CiTY - ST - ZiP		
TITLE	D	DELETÉ	2.1 TRILE		Change Addition
NAME	Wiggins, Joseph B Sr.		2.2 NAME		
STREET ADDRESS	3773 CREEK HOLLOW LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIDDLEBURG FL 32068		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 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELET E	4.4 CITY-ST-ZIP		Channe Addition
TITLE		C OCCCIE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		□ occir	6.2 NAME		First Attention First Manifold
			6.3 STREET ADDRESS		
STREET ADDRESS			6.4 CITY - ST - ZIP		
CITY-ST-ZIP	ertify that the information supplied wi	th this filing does not qualify for	the exemption stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated of the control of the cont	on this appual report or supplemental	l annual report is true an d a ccu iver or trustee empowered to e:	rate and that my signature	e shall have the same legal effect as if made i ired by Chapter 607, Florida Statutes; and tha	under oath; that I am an 🔠