

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000042005
1. Entity Name:
FLORIDA ENVIRONMENTAL CLEARING, INC.

APPROVED
AND
FILED

01 JAN 17 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1325 Hwy 27 N P.O. Box 1567
DAVENPORT, FL 33837 1325 Hwy 27 N
DAVENPORT, FL 33836

2. Principal Place of Business 3. Mailing Address
1325 HWY 27 N. P.O. Box 1567
State, Apt. #, etc. State, Apt. #, etc.
1325 HWY 27 N.

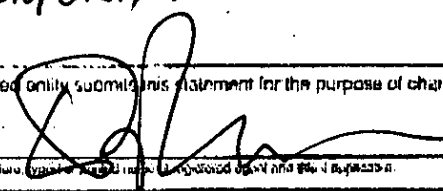
City & State City & State
DAVENPORT, FL. DAVENPORT, FL
Zip 33837 Country POLK Zip 33836 Country POLK

4. FEI Number 59-3314050 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
Esposito, RAE SHARON
1325 Hwy 27 N.
DAVENPORT, FL - 33837

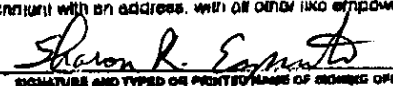
7. Name and Address of New Registered Agent
Name Corp Direct Agents
Street Address (P.O. Box Number Not Acceptable)
103 N. Meridian St.
Lower Level
City Tallahassee FL Zip Code 32301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida
SIGNATURE  Kevin R. Roberts, Agent for Corp Direct Agents 1-7-01

9. This corporation is eligible to kindly its Intangible
Tax filing requirement and elect to do so. ☐
(See criteria on back)
FILE NOW!! FEE IS \$150.00
FOR MAY 1, 2001 Fee will be \$500.00
Make Check Payable to Department of State
10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete D. Esposito, Sharon R. 1325 Hwy 27 N. DAVENPORT, FL 33837	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete REINSTATEMENT 2000 & 2001 cos	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition 200003552902 -01/18/01--01011--002 ****908.75 ****908.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  1/14/2001 (863) 422-7571
SIGNATURE AND TYPED OR PRINTED NAME OF DOMESTIC OFFICER OR DIRECTOR Date Filing Month &