

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

FILED
Jun 07, 1999 8:00 am
Secretary of State

06-07-1999 90009 039 ***550.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000042544

1. Corporation Name
GROUNDWATER CONTROL, INC.



Principal Place of Business 11511 PHILLIPS HWY JACKSONVILLE FL 32256 US	Mailing Address 11511 PHILLIPS HWY JACKSONVILLE FL 32256 US
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DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 06/01/1995	
4. FEI Number 59-3317723	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Zip 29
	Country 30

9. Name and Address of Current Registered Agent

(Faint, illegible text)

10. Name and Address of New Registered Agent

81 Name Dennis E. Welling	
82 Street Address (P.O. Box Number is Not Acceptable) 11511 Phillips Highway	
83	
84 City Jacksonville	85 Zip Code FL 32256

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BOCCHINO, WILLIAM	
STREET ADDRESS	11511 PHILLIPS HWY	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HALUCH, JEFFREY	
STREET ADDRESS	11511 PHILLIPS HWY	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> DELETE
NAME	WELLING, DENNIS	
STREET ADDRESS	1511 PHILLIPS HWY	
CITY-ST-ZIP	JACKSONVILLE FL 32256	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *(Signature)* DATE: *5/18/99* DAYTIME PHONE #: *904-886-3700*

CR2E034 (11/98)