

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

FILED  
Aug 05 1998 8:00am  
Secretary of State

DOCUMENT # **P95000062991 (1)**  
1. Corporation Name

**ENVIRONMENTAL TECHNOLOGIES OF SARASOTA, INC.**



Principal Place of Business Mailing Address  
**4790 DUNN DRIVE**  
**SARASOTA FL 34233**  
**5482 BENEVA WOODS CIRCLE**  
**SARASOTA FL 34233**  
**US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 **5482 BENEVA WDS. CIR.** 26  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 City & State 27  
23 **SARASOTA, FL** 28  
Zip Country Zip Country  
24 **34233** 25 **USA** 29 30

3. Date Incorporated or Qualified

**08/14/1995**

4. FEI Number

**59-3334364**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**LEWIS, KURT F**  
**6624 GATEWAY AVENUE**  
**SARASOTA FL 34231**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>ROBINSON, KENNETH</b>	
STREET ADDRESS	<b>4790 DUNN DRIVE</b>	
CITY-ST-ZIP	<b>SARASOTA FL</b>	
TITLE	<b>ST</b>	<input type="checkbox"/> DELETE
NAME	<b>MCWATERS, CHARLES</b>	
STREET ADDRESS	<b>5482 BENEVA WOODS CIRCLE</b>	
CITY-ST-ZIP	<b>SARASOTA FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	<b>5000026094</b>
5.3 STREET ADDRESS	<b>-08/06/98--01053--038</b>
5.4 CITY-ST-ZIP	<b>***150.00</b>
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.

SIGNATURE

*Charles McWaters*

7. 7.98

(94)922.7137

CR2E034 (5/98)

(2)

**Environmental Technologies, Inc.**

5482 Beneva Woods Circle  
Sarasota, Florida 34233  
July 27, 1998

Florida Department of State  
Annual Reports Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: 59-3334364

Gentlemen:

When I received the "Second Notice" for a corporate annual report with a late filing penalty of \$400.00, I contacted your office immediately. I had never received a "First Notice". Ours is a very small business, and I try to keep up with the taxes and records of the business in addition to my other employment. I use notices from your office to alert me to the necessity to file a report, and barring receipt of a notice, I failed to file and pay before the first deadline.

I sent a request that the penalty be waived along with my report and payment to the address on the enclosed envelope. Today I received the enclosed form letter.

Please excuse the late filing penalty for our company. My tardiness was based on the fact that I didn't receive the first notice. A penalty of this size will be a true hardship for us. Thank you for your consideration.

Sincerely,

  
Virginia McWaters

Encl: Form letter from your office  
Corporate Annual Report  
Check for \$150.00