

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jan 24 1996 8:00 am
Secretary of State

DOCUMENT # P95000070508 (3)

1. Corporation Name

LEAD TESTING RESOURCES, INC.



Principal Place of Business

Mailing Address

11404 COUNTRY OAKS DRIVE
TAMPA FL 33624

11404 COUNTRY OAKS DRIVE
TAMPA FL 33624

3. Date Incorporated or Qualified
09/08/1995

3a. Date of Last Report
N/A

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

4. FEI Number

59-3342796

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, GLENN E
2529 WEST BUSCH BOULEVARD
SUITE 900
TAMPA FL 33613

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME BAUHOFF, EMILY
STREET ADDRESS 11404 COUNTRY OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME BAUHOFF, EMILY
1.3 STREET ADDRESS 11404 COUNTRY OAKS DR
1.4 CITY-ST-ZIP TAMPA, FL. 33624

TITLE D ☒ DELETE
NAME BARNHART, BETTY L
STREET ADDRESS 11404 COUNTRY OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

2.1 TITLE SECRETARY/TREASURER ☒ Change ☐ Addition
2.2 NAME BARNHART, BETTY L.
2.3 STREET ADDRESS 11404 COUNTRY OAKS DR
2.4 CITY-ST-ZIP TAMPA, FL. 33624

TITLE D ☒ DELETE
NAME BERTONCINI, BETTY J
STREET ADDRESS 11404 COUNTRY OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

3.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition
3.2 NAME BERTONCINI, BETTY J
3.3 STREET ADDRESS 11404 COUNTRY OAKS DR.
3.4 CITY-ST-ZIP TAMPA, FL. 33624

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

BETTY L. BARNHART
Betty L. Barnhart Secretary/Treasurer

1-19-96 813-568-1608
Date Daytime Phone #

CR2E034 (12/95)