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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE NAME

STREET ADDRESS

CICNATURE

CITY-ST-ZIF



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013676 (7)

APS ENVIRONMENTAL ASSOCIATES, INC.

Principal Place of Business Mailing Address 3446 S.W ARMELLINI AVE. P.O. BOX 678 PALM CITY FL 34991 PALM CITY FL 34991 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0639582 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Žip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NICHOLASON, JOHN J. 3446 SW ARMELLINI AVE 82 Street Address (P.O. Box Number is Not Acceptable) PALM CITY FL 34990 83 84 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 registored agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE SCHWARZ, JAMES K. NAME 1.2 NAME 4437 SW CHEROKEE ST STREET ADDRESS 1.3 STREET ADDRESS PALM CITY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP STD DELETE Change Addition TITLE 2.1 TITLE ARMELLINI, RICHARD Armellini, Richard 1190 SW DRYER POINT RD 2671 Meadow Wood Court 2.3 STREET ADDRESS STREET ADDRESS PALM CITY FL Weston, FL 33332 CITY-ST-ZIP 2. 4 CITY+ST-ZIP DELETE Change Addition TITLE 3.1 TITLE POST, ROBERT M. JR. NAME 3.2 NAME 61 SE HARBOR POINT DR STREET ADDRESS 3.3 STREET ADDRESS STUART FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETÉ Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETÉ Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 of supplemental annual toport 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 of trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with any address. 3/9/98 561-287-0575

Change

Addition

FILED

Mar 17 1998 8:00am

Secretary of State