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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P96000022740**1. Corporation Name

EARTH FRIENDLY RESOURCES, INC.

Principal Plac	ce of Business	Mailing	Address] ') (46)(46) (48 (81) 8 BILL BA		10112 (1011	J 11921 149	
503 E. MONRO		P.O. BO										
JACKSONVILLE FL 32202 JACKSONVILLE FL 32201					DO NOT WRITE IN				MOITE IN T	TUIC CE	MCE	
	•						3 Date	Incorporated or Quali		113 31	ACE_	
							1	11/1996	ilea			
2. Principal P	Place of Business	2a. Mai	iling Address				4. FEI N				$\top \top_{7}$	pplied For
21		26					1	3420022				lot Applicable
Suite, Apt.	#, etc.		te, Apt. #, etc.				1					Additional
22		27					5. Certif	fcate of Status Desire	d 🗆			Required
City & Stat	te .		/ & State				6. Flecti	ion Campaign Financi	ing _		\$5.00	May Be
23		28					1	Fund Contribution	a 🗆			to Fees
Zip	Country	Zip		Cour	ntry		8. This c	corporation owes the	current vea	r Intano	ible	
24	25	29	•	30			1	onal Property Tax.	,		Yes	□No
	9. Name and Address of Curre	ent Registered	J Agent				10. Name	e and Address of Ne	w Registe	red Ago	ent	
			•		81	Name						
	EBEE, DAVID B	v *		-	82	Street Addre	ee (P O Bo	ox Number is Not Acc	entable)			
	E. MONROE ST.				-	Olieot Additi	.o. u.	A Mainber is Not Acc	eptable)			
JAC	KSONVILLE FL 32202				83	., ,						9 1.5
				Ļ				<u> </u>				
					84	City				FL	35 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.15	08, Florida Statute	es, the ab	ove-	named corpor	ration subm	nits this statement for	the purpose	e of cha	nging it	s registered
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida. Si	uch change was at	uthorized	by th	ne corporation	n's board of	directors. I hereby a	ccept the ar	pointm	ent as r	egistered
_	in terminer with and accept the oblig	gations or, occi	, , , , , ,	ilda Otatu	100.							
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applic	able. (NOTE:	: Registered A	Agent s	signature required v	when reinstating	g) '·	DATE			
12.	OFFICERS A	ND DIRECTO	RS	13.			ADDIT	IONS/CHANGES TO	OFFICERS	AND [DIRECT	ORS IN 12
TITLE	D	-	☐ DELETE	1.1 TITL	E] Change	☐ Addition
NAME	Ferebee, David B			1.2 NAM	ΛE							
STREET ADDRESS	503 E. MONROE ST.			1.3 STR	REETA	DDRESS						
CITY-ST-ZIP	JACKSONVILLE FL 32202			1.4 CITY	Y-ST-Z	ZIP						
TITLE			☐ DELETE	2.1 TML	E.						Change	Addition
NAME											1 one igo	ì
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- 31			☐ DELETE	2.3 STR 2.4 CIT 3.1 TITL 3.2 NAM	Y-ST- E ME REET AI Y-ST-	ZIP DDRESS						☐ Addition
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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 eceiver or trustee emprovered 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:

904 318 - 7001 Daytime Phone #

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90051 001 ***150.00