Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90037 035 \*\*\*150.00

## 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 # P96000073931

SEPARAI	DYNE ENVIRONMENTAL, II	NC.					
Principal Place of Business Mailing Address							
5100 ULMERTON RD 2035 DODGE STREET							
CLEARWATER FL 33760 CLEARWATER FL 34620					DO NOT WRITE IN THIS SPACE		
US		•			3. Date Incorporated or Qualifed		
					09/03/1996		
	Principal Place of Business 2a. Mailing Address				4. FEI Number	$\vdash$	plied For
21 26					59-3399687		t Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>5./5</b> A Fee Re	Additional
22				<u> </u>			·
City & State	·			6. Election Campaign Financing \$5.00 May E			
23	28					o rees	
Zip	Country	Zip		anuy	8. This corporation owes the current year Intangib		□No
24	9. Name and Address of Curre		30	Г	Personal Property Tax.		<u> </u>
	9. Name and Address of Cure	iii Registereu Agent		81 Name	10. Hame and Address of Now Nogletones 18	·	
GRAYSON, KENT N							
2035 DODGE STREET				82 Street A	Address (P.O. Box Number is Not Acceptable)		
CLEARWATER FL 34620				83			
-				**			
				84 City	85	Zip (	Code
				<u> </u>	<u> </u>	alas ita	cistored
11. Pursuant i office or re agent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State m <del>ra</del> miliar with, and accept the obliga	02 and 607.1508, Florida Statutes o of Florida. Such change was aut ations of, Section 607.0505, Florid	s, the a thorized da Ştatı	bove-named o I by the corpo utes.	corporation submits this statement for the purpose of chan rration's board of directors. I hereby accept the appointme	nt as re	gistered
SIGNATURE	Signature Typed or printed flame of registered age	Lange Jane	#.	Grays.	oquired when reinstating) DATE	79	
12.	- /	ND DIRECTORS	13.	- Agent argulature it	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTO	DRS IN 12
TITLE	PS	☐ DELETE	1.1 Π	R.E.		Change	Addition
NAME	GRAYSON, KENT N		1.2 N/	AMF			ĺ
STREET ADDRESS	COOP DODGE OF			REET ADDRESS			
	CLEARWATER FL 34620			TY-ST-ZIP			
CITY-ST-ZIP TITLE	VT DELETE			TLE (	·····	Change	☐ Addition
	GRAYSON, JANE H	<u> </u>	22 N	1		-	-
NAME STREET ADDRESS	2035 DODGE ST			REET ADDRESS			1
\ \ \ \ \ \ \ \	CLEARWATER FL 34620			TY-ST-ZIP			٠ - ا
C/TY-ST-ZIP	CLEARWATCH I L 34020	- DELETE	3.1 TI			Change	[ ] Addition
{			3.2 N/		· · · · · · · · · · · · · · · · · · ·	·	_ [
NAME	·						
STREET ADDRESS				REET ADDRESS	•		
CITY-ST-ZIP			_	TY-ST-ZIP	<u> </u>	Change	Addition
TITLE			4.1 TT	1	О		
NAME			4. 2 N	1			1
STREET ADDRESS	• .			REET ADDRESS			1
CITY-ST-ZIP			_	TY-ST-ZIP		Change	Addition
TITLE	,	☐ DELETE	5.1 TT	-		orialiye	

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.

5.3 STREET ADDRESS

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

**SIGNATURE:** 

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

Change

☐ Addition