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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

NAME

STREET ADDRESS

P96000101665 (3)

ENVIRONMENTAL PERMITTING ASSOCIATES, INC.

<b>3</b> .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Principal Plac	ce of Business	Mailing A	Mailing Address			a tamtidet tim i Bien gietr antes meier übelt tinte neinr tinte detta bilde kere inne
2001 BOMAI SUITE 3	R ROAD	2001 BOMAR ROAD SUITE 3				
NORTH PAL	M BEACH FL 33408	NORTH PALM BEACH FL 33408				DO NOT WRITE IN THIS SPACE
:						3. Date Incorporated or Qualified 01/01/1997
2. Principal F	Place of Business	2a. Mailir	2a. Mailing Address			4. FEI Number Applied For
21		26	<del></del>			65-0710881 Not Applicable
Suite, Apt	, #, etc.	Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27	<del></del>			Fee Required
City & Sta	te	<u></u> ⊢ ·	Crty & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip			ıry	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curre	29	Agent	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
CI		ant mogratores a	-Aguir		Name	In. Halle and Appross of New Pagistorod Agent
	HAW, LARRY			L		
2001 BOMAR ROAD				٤	Street A	ddress (P.O. Box Number is Not Acceptable)
SUITE 3				ŀ.	13	
NORTH PALM BEACH FL 33408				"	~	
				8	14 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 region 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	,					
JOHATORE	Signature, typed or printed name of registered a	gent and little if applica	able (NO	E Hagislared /	Agent signature re	equired when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P P P P P P P P P P P P P P P P P P P		DELETE	1.1 TITLE	£ [	Change Addition
NAME	RIGGINS, EDWARD D			1.2 NAM	E	
STREET ADDRESS 2001 BOMAR RD, STE 3				1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 3	3408			-S1-ZIP	
TITLE	S		DELETE	2.1 T(TL)	f	☐ Change ☐ Addition
NAME	SHAW, LARRY			2.2 NAM	E	
STREET ADDRESS	2001 BOMAR RD, STE 3			2.3 STRE	ET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 3	3408		_	(-ST-ZIP	
TITLE			☐ DELETE	3.1 TITLE		Change Addition
NAME	1			3.2 NAM	1	
STREET ADDRESS				3.3 STRE	ET ADDRESS	
CITY-ST-ZIP					(-ST-ZIP	
TITLE			☐ DELETE	4.1 TOTAL		Change Addition
NAME				4. 2 NAN		
STREET ADDRESS	ļ			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP					-ST-ZIP	
TITLE			☐ DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAM	F i	
STREET ADDRESS				5 3 STRE	ET ADDRESS	
CITY-ST-ZIP				5.4 C/TY		
TITI C	i .		DELETE	£ 4 7171 f	-	Change Addition

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an effectment with an address.

6.2 NAME

1-30-91

(561)122-155

**FILED** 

Feb 04 1998 8:00am

Secretary of State