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FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000103947 (3)

1. Corporation Name

ESI VANSYCLE LP, INC.

Principal Place of Business

11760 U.S. HWY 1
NORTH PALM BEACH FL 33408

Mailing Address

11760 U.S. HWY 1
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/26/1996

4. FEI Number

APPLIED FOR 65-0728170

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No ☒ Attached

2. Principal Place of Business

21 Suite, Apt. #, etc. 26 Mailing Address

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

24 25 29 30

9. Name and Address of Current Registered Agent

LEON, J E
9250 W FLAGLER ST
MIAMI FL 33174

10. Name and Address of New Registered Agent

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SA ☐ DELETE

NAME TANCER, EDWARD F
STREET ADDRESS 11760 U.S. HWY 1
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE DP ☐ DELETE

NAME CARPENTER, LARRY K.
STREET ADDRESS 11760 US HWY 1
CITY-ST-ZIP N. PALM BEACH FL

TITLE DV ☐ DELETE

NAME GELBER, LESLIE J.
STREET ADDRESS 11760 US HWY 1
CITY-ST-ZIP N. PALM BEACH FL

TITLE DT ☒ DELETE

NAME MC GRATH, ROBERT L.
STREET ADDRESS 11760 US HWY 1
CITY-ST-ZIP N. PALM BEACH FL

TITLE S ☐ DELETE

NAME CARPENTER, FRANCES M.
STREET ADDRESS 11760 US HWY 1
CITY-ST-ZIP N. PALM BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DT ☐ Change ☒ Addition

1.2 NAME BOYLAN, PETER D
1.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
1.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

2.1 TITLE DV ☒ Change ☐ Addition

2.2 NAME CARPENTER, LARRY K
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE DP ☒ Change ☐ Addition

3.2 NAME GELBER, LESLIE J
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE AS ☐ Change ☒ Addition

4.2 NAME HATHAWAY, SCOT C
4.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
4.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

5.1 TITLE AS ☐ Change ☒ Addition

5.2 NAME PONDER, STEPHEN H
5.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
5.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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: FRANCES M CARPENTER, SECRETARY *Frances M. Carpenter* 2/18/98 (561)691-3500

CR2E034 (10/97)