

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

FILED
Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000019057 (3)
1. Corporation Name
GEOLOGIC & ENVIRONMENTAL CONSULTANTS, INC.



Principal Place of Business 2410 SUCCESS DRIVE SUITE B SUITE 8 ODESSA FL 33556	Mailing Address 2410 SUCCESS DRIVE SUITE B SUITE 8 ODESSA FL 33556
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2410 Success Dr. #8 Suite, Apt. #, etc. 22 8 City & State 23 Odessa, FL Zip 24 33556 Country 25 USA		2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 Same City & State 28 Odessa, FL Zip 29 33556 Country 30 USA		3. Date Incorporated or Qualified 02/24/1997 4. FEI Number 59-3437848 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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9. Name and Address of Current Registered Agent HARRO, DAVID B 2410 SUCCESS DRIVE SUITE B SUITE 8 is CORRECT ODESSA FL 33556 ODESSA FL 33556		10. Name and Address of New Registered Agent 81 Name None 82 Street Address (P.O. Box Number is Not Acceptable) None 83 None 84 City None 85 Zip Code FL None	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	David Harro	1.2 NAME	
STREET ADDRESS	19415 Pine Tree Road	1.3 STREET ADDRESS	
CITY-ST-ZIP	Odessa, FL 33556	1.4 CITY-ST-ZIP	
TITLE	Secretary/Treasurer <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Karen Harro	2.2 NAME	
STREET ADDRESS	19415 Pine Tree Road	2.3 STREET ADDRESS	
CITY-ST-ZIP	Odessa, FL 33556	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____ DATE 4/10/98

CR2E034 (10/97)