May 01 00 03:21p Pam Hibert

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State
05-19-2000 90047 050 ***150.00

DOCUMENT # P97000028308

1. Entity Name

ENVIRONMENTAL PROPERTIES, INC.

Principal Place of Business	Mailing Address
4910 MAHAN DRIVE TALLAHASSEE FL 32308 US	4910 MAHAN DRIVE TALLAHASSEE FL 32751-5692 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8511 Bull Headley Rd	8511 Bull Headley Rd.
Suite, Apt. #, etc. Suite 400	Suite, Apt. #, etc. Suite 400
City & State Tallahassee, Fl.	City & State Tallahassee, Fl.
Zip 32312 Country U.S.	Zip 32312 Country U.S.

4. FEI Number 59-3439166 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOOTH, CHARLES M
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name Tim Howard Attorney
Street Address (P.O. Box Number is Not Acceptable) Suite 400
City Tallahassee FL Zip Code 32312

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Alta M. Booth Sec + Treas.
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D 4910 MAHAN DR TALLAHASSEE FL 32308 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Christes M. [illegible] 343 Cherokee Lane Winter Park, Fl. 32789 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. President C. A. Johnson 2212 Forsythe Rd. Winter Park, Fl. 32789 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alta M. Booth May 1, 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #