## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # **P9700061651**

1. Entity Name

## ENVIRONMENTAL SCIENCE ASSOCIATES, INC.

Principal Place of Business

Mailing Address

**FILED** Feb 29, 2000 8:00 am Secretary of State

02-29-2000 90240 001 \*\*\*150.00

= JEFFERSON AVE.		35 JEFFERSON AVE. PONTE VEDRA BEACH FL 32082-2810		VICUU	
2. Principal Place of Business  Suite, Apt. #, etc.  City & State		3. Mailing Address			
		Suite, Apt. #, etc.  City & State		DO NOT WRITE IN THIS SPACE	
				4. FEI Number 59-3462250	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registere	d Agent
MORIARTY, RICHARD 35 JEFFERSON AVE. PONTE VEDRA BEACH FL 32082			Street Addres	Street Address (P.O. Box Number is Not Acceptable)	
1 011	TE TESTIVE SELECTIVE SESSE		City	F	Zip Code
8. The above	e named entity submits this statement for	the purpose of changing its	s registered office or regis	stered agent, or both, in the State of Florida.	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if annicable . (NO)	TE: Registered Agent signature requ	ured when reinstating) DATI	
Tax filing requirement and elects to do so.  After MAY 1, 2000		'!!! FEE IS \$150.00 000 Fee will be \$550.00 ble to Department of S		\$5.00 May Be Added to Fees	
11.	OFFICERS AND	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORIARTY, RICHARD 35 JEFFERSON AVE. PONTE VEDRA BEACH FL 32082	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-2IP		☐ 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		☐ Defete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further of	☐ Change ☐ Addition

13. 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

-Richard Moriarty