PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 21, 1999 8:00 am Secretary of State 05-21-1999 90003 022 ***150.00

1. Corporation	MENT# P9800	0043971								
RESOURCE CONSERVATION SERVICES INC					 					
Principal Plac	ce of Business	Mailing Address				* 5	7 3 573010 - 9		itt i ä ät	
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2. Principal F	Place of Business	2a. Mailing Address			. FEI Numb	er			pplied For	1
21 613	7 MAPLEWOOD DR.	26 P.O. Ba	K 603			59-35	11,538	N	ot Applicable]
Suite, Apt.		Suite, Apt. #, etc.			S. Certificate	of Status Des	ired 🗍	¥ - · · · •	Additional	
22		27						Fee R	equired	4
City & State City & State City & State City & State ELFERS, _FL ELFERS, _FL				6. Election Campaign Financing \$5.00 May Be						
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24 000	9. Name and Address of Current		N				New Registe		23	1
			81 Name		-		1 SK			7
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5370 BAST BAY DRIVE, SUITE 153				413	37 0	APLE	SOD)	DR_		Ţ
CICAL	11114750 Ct 757/U	•	83							
CCOMA	ewater, fl 33764		84 City		1			. 85 Zip	Code	┨
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11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes Florida, Such change was aut	i, the above-named horized by the coroo	corporation s	on submits the	is statement i stors. I hereby	for the purpose accept the ar	e of changing its pointment as re	registered gistered	
agent. I a	registered agent, or both, in the State of im familiar with, and accept the objection	as of, Section 607.0505, Florid	la Statutes.	1	•	,	/	<i>!</i>	•	1
SIGNATURE	Mary of the	_ onny (.	The SYL	PRI	SIAM	-	Y/29	/CC '		ı
12.	Signature, typica of model agent a OPFICERS AND		оренитео Ареп; мупация г				DATE	·7		١.
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NAME		DIRECTORS	13. 1.1 MLE	PST	ADDITIONS	/CHANGES	DATE O OFFICERS	AND DIRECTO	DR\$ IN 12	11/08)
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STREET ADDRESS	GARY T. JULIAN	☐ DELETE	1.1 TITLE	PST	ADDITIONS D	rund.				E034 /11/98)
STREET ADDRESS	5370 EAST BAY PAL	☐ DELETE	1.1 TITLE 12 NAME	PST GAR 613	ADDITIONS	CALLIA BOOMES	SR.	[⊌ Change		R2E034 (11/98)
	GARY T. JULIAN 5370 EAST BAY PAU CLEMEWATTH, EL 337X VA	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	PST GAR 613	ADDITIONS O T. 5	CALLIA BOOMES	SR.	[⊌ Change		CR2F034 /11/98)
CITY-ST-ZIP	5370 EAST BAY PAU CLEMENATON, D. 3370 VA	DASTELEE	1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PST GAR 613	ADDITIONS O T. 5	CALLIA BOOMES	SR.	E Change	Addition	CR2F034 (11/98)
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CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	5370 EAST BAY PRUI CLEMENATEN, EL 3370 VA DIM HEISER 5370 EAST BAY DANIS CLEMANATEN, EL 3570 DAVID & HICKMAN 5370 EAST BAY DAN	DETELE DETELE DETELE DETELE DETELE DETELE DETELE	1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS	PST GAR 613	ADDITIONS O T. 5	CALLIA BOOMES	SR.	Change Change	Addition Addition	CR2E034 (11/98)

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 supplementel 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 Instee emographed to execute this report as required by Chapter 60?. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an appared ment with an appears in the empowered.

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

6.3 STREET ADDRESS

6 4 CITY-ST-ZIP

(727)842-464>