



FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000041015 1. Entity Name FIRST ENVIRONMENTAL SERVICES, INC.				Jan 10, 2005 08:00 A Secretary of State	
Principal Place of Business 4106 A1A SOUTH ST. AUGUSTINE, FL 32080		Mailing Address 280 N.E. 1ST AVE HIGH SPRINGS, FL 32643			
DO NOT WRITE IN THIS SPACE					
				01072005 No Chg-P CR2E034 (10/03)	
DO NOT WRITE IN THIS SPACE				4. FEI Number 59-3591042	
				Applied For Not Applicable	
DO NOT WRITE IN THIS SPACE				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
5. Name and Address of Current Registered Agent GALLETTA, JOHN JR.,ESQ 4100 A1A SOUTH ST.AUGUSTINE, FL 32084				DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SOUTHERN, DAVID 280 N.E. 1ST AVE HIGH SPRINGS, FL 32643	DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SOUTHERN, NANCY 280 NE 1ST AVE HIGH SPRINGS, FL 32643				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WENDLER, SCOTT 122 SAN JOSE FOREST DRIVE ST.AUGUSTINE, FL 32084				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WENDLER, DONNA 122 SAN JOSE FOREST DRIVE ST.AUGUSTINE, FL 32084				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>David Southern President</i>		1/7/05 904/823-1928			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			