

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071388

1. Entity Name

ENVIRONMENTAL RESTORATION COMPANY

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90046 019 ***150.00

Principal Place of Business

900 UNIVERSITY BLVD NORTH SUITE 102
JACKSONVILLE FL 32211

Mailing Address

900 UNIVERSITY BLVD NORTH SUITE 102
JACKSONVILLE FL 32211

2. Principal Place of Business

1560 Lancaster Terrace

3. Mailing Address

1560 Lancaster Terrace

Suite, Apt. #, etc.

#202

Suite, Apt. #, etc.

#202

City & State

Jacksonville FL

City & State

Jacksonville FL

Zip

32204

Country

USA

Zip

32204

Country

USA

4. FEI Number

59-3592221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUTCHINS, ROBERT J
222 WEST COMSTOCK AVENUE SUITE 111
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2001 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

TITLE **D** ☐ Delete
NAME **LITTEK, ALBERT G**
STREET ADDRESS **900 UNIVERSITY BLVD NORTH SUITE 102**
CITY-ST-ZIP **JACKSONVILLE FL 32211**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D LITTEK, ALBERT G**
STREET ADDRESS **1560 Lancaster Terrace #202**
CITY-ST-ZIP **JACKSONVILLE, FL 32204**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Albert G. Littek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/18/2001 (904) 359-0555
Daytime Phone #

CR2E034 (10/00)