FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

PHOENIX ENVIRONMENTAL ASSOCIATES, INC.

] #44444 141 141 141 141 141 141 141 141			
Principal Place of Business Mailing Address			E emblidift tilt elmis elibit state milita sent mellis min	ii Mifite Matte diffet fible bade		
2016 E. PARK AVE. Tallahassee fl 32301 US	2016 E PARK AVE Tallahassee Fl 32308 US		DO NOT WRITE IN THIS SPACE			
			Date Incorporated or Qualified 12/10/1990			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		59-3040993	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 25	Zip Coi	untry	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible Yes ☐ No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
CONIGLIO, MICHAEL J		81 Name				
104 EAST THIRD AVENUE TALLAHASSEE FL 32303		82 Street Address (P.O. Box Number is Not Acceptable)				
		83				
		84 City	FL	85 Zip Code		
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes, the a	above-named corr	poration submits this statement for the purpose of			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature. typed or printed name of registered agent and title ill applicable (NOTE Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	D	DELETE	1.1 TITLE			Change	☐ Addition		
NAME	armstrong, randall L.		1.2 NAME						
STREET ADDRESS	2916 E. PARK AVE.		1.3 STREET ADDRESS						
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-ST-ZIP]					
TITLE	D	DELETE	2.1 TITLE			Change	☐ Addition		
NAME	Danser, Russell E.		2.2 NAME	RUSSELL	K. DANSER				
STREET ADDRESS	3465 LENOX MILL RD.		2.3 STREET ADDRESS	1					
CITY-ST-ZIP	Tallahassee fl		2. 4 CITY-ST-ZIP						
TITLE	D	DELETE	3.1 TITLE			☐ Change	Addition		
NAME	Lewis, steven		3.2 NAME						
STREET ADDRESS	215 S. MONROE ST., #701		3.3 STREET ADDRESS	ĺ					
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY - ST - ZIP						
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition		
NAME			4. 2 NAME	İ					
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY - ST- ZIP						
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition		
NAME			5 2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS	Ì					
CITY-ST-ZIP			5.4 CITY - ST - ZIP						
TITLE		DELETE	6.1 TITLE	1		Спапре	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS	1					
CITY-ST-ZIP			6.4 City - St - ZIP	1					

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 supplemental 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an altachment with an oddress.

1/22/98

FILED

Apr 17 1998 8:00am

Secretary of State