## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 18, 2005 08:00 AM **DOCUMENT # S17248** Secretary of State PHOENIX ENVIRONMENTAL ASSOCIATES, INC. Principal Place of Business Mailing Address 2916 EAST PARK AVENUE 21 HARBOUR POINT DRIVE TALLAHASSEE, FL 32301 CRAWFORDVILLE, FL 32327 US 01082005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3040993 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CONIGLIO, MICHAEL J DO NOT WRITE 104 EAST THIRD AVENUE TALLAHASSEE, FL 32303 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) U00000235087 \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 02/18/05-80048-001 150.00 Added to Fees OFFICERS AND DIRECTORS 10. D ARMSTRONG, RANDALL L NAME STREET ADDRESS 21 HARBOUR POINT DRIVE CITY-ST-ZIP CRAWFORDVILLE, FL 32327 D TITLE DANSER, RUSSELL K STREET ADDRESS 3465 LENOX MILL ROAD CITY-ST-ZIP TALLAHASSEE, FL 32308 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME. STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

**FILED** 

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICE OR PIRECTOR DATE L 2. ARMSTRONG 01/27/05 850-566-9219