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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \$38607

(5)

ENVIRONMENTAL LAND SERVICES, INC.

FILED
May 07 1997 8:00am
Secretary of State



| Principal Place of Business 6314 CORPORATE CT STE C-1 FT MYERS FL 33919 US | | Mailing Address 6314 CORPORATE CT | | | T (FERMOND AND ANION ARTHO ENTIL BONN AND BANKA DIGHT BANKA | | |
|--|---|--|--------------------|----------------------------------|---|------------------|--------------------|
| | | | | | | | |
| | | FT MYERS FL 33919-3516 US | | | 3. Date Incorporated or Qualified | | |
| | | 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number |
| 21 | | 26 | | | AF 0000430 | | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8. | 75 Additional | |
| 22 | | 27 | · <u>-</u> | | 5. Comincate of Status Desired | └ F€ | e Required |
| City & State | | City & State | | 6. Election Campaign Financing | | | |
| 23 Country | | Zp Country | | | Trust Fund Contribution | | |
| Zip | Country | Zψ | ├ ─¬ | itry | 8. This corporation has liability for in | Mangible tax und | der s. 199.032, |
| 24 | 25 9. Name and Address of Curren | 1 Registered Agent | 30 | | Florida Statutes 10, Name and Address of New Reg | Yes No | |
| - POI II | | r negistered Agoin | | 81 Name | 10, Name and Address of New Act | netered Agent | |
| BRUNETT, PHILIP L 2449 FIRST STREET | | | | BURNETT, PHILIP L (SPELLING) | | | |
| | IYERS FL 33902 | | [1 | Street Ac | dress (P.O. Box Number is Not Acceptable | e) | |
| ri M | HERO FE 33502 | | h | B3 | | · | |
| | | | | | | | |
| | | | Ī | B4 City | | FL 85 | Zip Code |
| 44 Durawant | to the provisions of Scations 607 0/0 | 2 and COZ 1500 Florido Statu | los the ab | 0.40 0000000 0 | orporation submits this statement for the pa | | ing its resistance |
| office or r | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida, Such change was | authorized | by the corpo | ration's board of directors. I hereby accep | t the appointmen | it as registered |
| SIGNATURE | Signature, typed or printed name of registered ages | of and build are dead le (NC) | Li - Doze et stord | Acural signature se | quired when reinstating) | DATE | |
| 12. | OFFICERS AND | | 13. | rige i aigrat die re | ADDITIONS/CHANGES TO OFFIC | | CTORS IN 12 |
| TITLE | PSTD | ☐ DELETE | 11101 | E | PD | XX Cha | |
| NAME | HOLDERFIELD, WILLIAM L | | 1.2 NAM | | 1.0 | ΛΛ | |
| STREET ADDRESS | 703 HUTTO ROAD | | 13 SIF | EET ADDRESS | | | |
| CITY-ST-ZIP | N. FT. MYERS FL | | 1 | Y · S1 · ZIP | | | |
| TITLE | VP | DELF1E | 2.1 1111 | | | Cha | nge Addition |
| NAME | DEORIE, DAVID G | | 2.2 NAN | ΛE | DEARIE, DAVID G (SE | PELLING | ł |
| STREET ADDRESS | 6314 CORPORATE COURT | | 2 3 S1H | EE1 ADORESS | | | |
| CITY-ST-ZIP | FT. MYERS FL | | | Y-ST-ZIP | | | |
| TITLE | VP | DELETE | 3 1 1116 | | | Cha | nge Addition |
| NAME | WELCH, R. A | | 3.2 NAI | AE . | | | |
| STREET ADDRESS | 114 NE 17TH AVE. | | 3.3 STR | EFT ADDRESS | | | |
| CITY-ST-ZIP | CAPE CORAL FL | | | Y- \$1- 7IP | | | |
| TITLE | VP | DELETE | 4 1 1110 | | | ☐ Cha | nge Addition |
| NAME | JONES, LINDA F | | 4. 2 NA | ME | | | |
| STREET ADDRESS | 703 HÚTTO ROAD | | | EET ADDRESS | | | |
| CITY-ST-ZIP | N. FT. MYERS FL | | | Y-ST-ZIP | | | |
| TITLE | | ☐ DELE1E | 5.1 1111 | | STD | Cha | nge XXAddition |
| NAME | | | 5.2 NAM | | SANTIMAW, ROBERT H. | | |
| STREET ADDRESS | | | 53 S1H | | 1450 SE 19th LANE | - | |
| CITY-ST-ZIP | | | 5.4 CIT | | CAPE CORAL, FL 339 | 990 | |
| TITLE | | DELETE | 61 TITU | | | Cha | nge 🔲 Addition |
| NAME | | | 6.2 NA | AF. | | | |
| STREET ADDRESS | | | 6.3 \$18 | EET ADDRESS | | | |
| CITY-ST-ZIP | | | | Y - \$1 - ZIP | | | |
| 44 Lda bassi | no and the short star independent of the Con- | ducity at the fitting place and as and | 0.,011 | | ad i- D4 440 07(0)() Fii-1- 0: 4 4 | 17. 11 | 11 |

I do nereby 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 eath, 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 3 if changed or on an attachment with an address.

CICNATURE

w

ROBERT H. SANTIMAW

4/28/97

941-432-0088