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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S49742 ENVIRODEVELOP, INC. Principal Place of Business Maling Address 3225 ANNISTON ROAD 3225 ANNISTON ROAD JACKSONVILLE FL 32246 JACKSONVILLE FL 32246-4805 3. Date Incorporated or Qualified 3a. Date of Last Report 05/03/1991 01/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3063531 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees 2ip Country Country 8. This corporation has liability for intangible tax under s. 199.032. 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent JOHNS, CAROLE F 81 Name 3225 ANNISTON ROAD 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32246 83 84 City 85 Zip Code 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 Statu 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 philipprior of, Section 607.0505, Florida Statutes. SIGNATURE egent and title if applicable (NOTE: Redistered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)TITLE DELETE 1.1 TITLE Change Addition JOHNS, A.J. NAME : 2 NAME 3225 ANNISTON ROAD STREET ADURESS 1.3 STREET ADDRESS JACKSONVILLE FL CHY-ST-7IP 1.4 City - ST- ZIP THILE DELETE 2.1 TITLE Change Addition JOHNS, CAROLE F MARAE 2.2 NAME 3225 ANNISTON ROAD STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CHY-ST-ZIP 2. 4 CITY - ST- ZIE VD TITLE DELETE 3.1 TITLE Change Addition JOHNS, TERESA A. NAMÉ 3.2 NAME 3225 ANNISTON RD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY - ST - ZIP 3.4 CITY-ST-ZIP SDT DELETE TITLE 4.1 TITLE Change Addition JOHNS, MARK V NAME 4 2 NAME 3225 ANNISTON RD STREET ADDRESS 4 3 STREET ADDRESS JACKSONVILLE FL CITY - S* - ZIP 4 4 CITY-ST-ZIP THILF ☐ DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS City - ST- ZIP 5.4 CITY-ST-ZIP TI"LE OELE TE 61 TITLE Addition Change NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** City ST-7IP 64 CITY-ST-ZIP 14. I do 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 arigual 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

SIGNATURE:

appears in Block 12 or Block 13 if o

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

rith an address

1-7-97

904-641-2055

FILED

Jan 21 1997 8:00am

Secretary of State