

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Gordon B. Murphree
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

5/11/95 4:13:05

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # **S74143** (6)
1. Corporation Name
ENVIRONMENTAL GEOSCIENCE & ENGINEERING, INC.

Principal Place of Business: **P O BOX 8687 JACKSONVILLE FL 32211**
Mailing Address: **P O BOX 8687 JACKSONVILLE FL 32211**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 08/15/1991	3a. Date of Last Report 05/01/1994
4. FEI Number 59-3079955	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032 Florida Statutes. ☒ Yes ☒ No	

2. Principal Place of Business 21. State, Apt. #, etc. 22. City & State 23. Zip	2a. Mailing Address 26. State, Apt. #, etc. 27. City & State 28. Zip
24. State, Apt. #, etc.	29. City & State
25. Zip	30. Zip

9. Name and Address of Current Registered Agent SMITH, JAMES O., JR. 3828 FEATHER OAKS DRIVE EAST JACKSONVILLE FL 32211	10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City, FL , 85. Zip Code
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11. Pursuant to the provisions of Sections 607.05(4) and 607.06(1) Florida Statutes, this 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 responsibility of the agent as set forth in Florida Statute.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. NAME 2. STREET ADDRESS 3. CITY & STATE 4. ZIP	☐ Change ☐ Addition
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b) Florida Statutes. I further certify that the information disclosed on the 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 manager or member empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1a of a change or continuation report with an address.

SIGNATURE: *Leah V. Smith* **Leah V. Smith** 5/11/95 (904) 743-7732
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR