

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JUL -5 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S87760** (2)
1. Corporation Name
H & F ENVIRONMENTAL SALES & SERVICES, INC.

Principal Place of Business
**2328 HWY 231
PANAMA CITY FL 32405
US**

Mailing Address
**2015 LIENBY AVENUE
PANAMA CITY FL 32405**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/16/1991** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-3089661** Approved 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**

7. This corporation has liability for franchise fee under its 1995
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 State Apt # etc

26 State Apt # etc

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HICKS, DWIGHT C
4409 TROPICAL DR
PANAMA CITY FL 32444**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0607 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office
and registered agent to be 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 607.0606, Florida Statutes.

SIGNATURE

Signature of person appointed as registered agent with Florida Seal

Signature of registered agent with no required seal

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (1)

NAME
D
HICKS, DWIGHT C.
2015 LIENBY AVENUE
PANAMA CITY FL

1. NAME
2. NAME
3. STREET ADDRESS
4. CITY & STATE

☐ Change ☐ Addition

NAME
NAME
STREET ADDRESS
CITY & STATE

1. NAME
2. NAME
3. STREET ADDRESS
4. CITY & STATE

☐ Change ☐ Addition

NAME
NAME
STREET ADDRESS
CITY & STATE

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NAME
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CITY & STATE

1. NAME
2. NAME
3. STREET ADDRESS
4. CITY & STATE

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b), Florida Statutes. I further
certify that the information indicated on the renewal report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under
oath. I am an officer or director of the corporation or the receiver or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name
appears in Block 12 or Block 13 of this report as an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

628 904 7630731