

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 05, 2001 8:00 am  
Secretary of State

04-05-2001 90045 038 \*\*\*158.75

DOCUMENT # V09415

1. Entity Name

GLOBAL ECO-LOGICAL SERVICES, INC.

Principal Place of Business

1230 PEACHTREE ST  
STE 2545  
ATLANTA GA 30309  
US

Mailing Address

1230 PEACHTREE ST  
STE 2545  
ATLANTA GA 30309  
US

2. Principal Place of Business

3 BROAD STREET

Suite, Apt. #, etc.

SUITE 300

City & State

CHARLESTON, SC

Zip

29401

Country

CHARLESTON

3. Mailing Address

3 BROAD STREET

Suite, Apt. #, etc.

SUITE 300

City & State

CHARLESTON, SC

Zip

29401

Country

CHARLESTON



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0405148

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LITTMAN, ERIC P  
7695 SW 104 STREET  
SUITE 210  
MIAMI FL 33156

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**AFTER MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> Delete
NAME	TUORTO, WILLIAM	
STREET ADDRESS	1230 PEACHTREE ST, STE 2545	
CITY-ST-ZIP	ATLANTA GA 30309	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	TUORTO, RICHARD D	
STREET ADDRESS	1230 PEACHTREE ST., STE 2545	
CITY-ST-ZIP	ATLANTA GA 30309	
TITLE	CAO	<input checked="" type="checkbox"/> Delete
NAME	COOK, RANDALL R	
STREET ADDRESS	1230 PEACHTREE ST, STE 2545	
CITY-ST-ZIP	ATLANTA GA 30309	
TITLE	ST	<input type="checkbox"/> Delete
NAME	DAVIS, GREGG	
STREET ADDRESS	1230 PEACHTREE ST, STE 2545	
CITY-ST-ZIP	ATLANTA GA 30309	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CAO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD D. TUORTO, JR.	
STREET ADDRESS	3 BROAD ST., SUITE 300	
CITY-ST-ZIP	CHARLESTON, SC 29401	
TITLE	CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARD D. TUORTO, SR.	
STREET ADDRESS	3 BROAD ST., SUITE 300	
CITY-ST-ZIP	CHARLESTON, SC 29401	
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGG DAVIS	
STREET ADDRESS	3 BROAD ST, SUITE 300	
CITY-ST-ZIP	CHARLESTON, SC 29401	
TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAM L. TUORTO	
STREET ADDRESS	3 BROAD ST., SUITE 300	
CITY-ST-ZIP	CHARLESTON, SC 29401	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)