

2025 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M17000001740

Entity Name: WIND RIVER ENVIRONMENTAL, LLC

Current Principal Place of Business:

46 LIZOTTE DRIVE
MARLBOROUGH, MA 01752

Current Mailing Address:

46 LIZOTTE DRIVE
MARLBOROUGH, MA 01752 US

FEI Number: 04-3487677

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: SANDY CLEM

01/30/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CFO
Name DUMONT, DONALD P
Address 46 LIZOTTE DRIVE,
SUITE 1000
City-State-Zip: MARLBOROUGH MA 01752

Title AUTHORIZED REPRESENTATIVE
Name MARTIN, STEPHEN
Address 13801 66TH STREET
City-State-Zip: LARGO FL 33771

Title CONTROLLER
Name STRONG, ANTHONY
Address 46 LIZOTTE DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title REGISTERED SEPTIC TANK
CONTRACTOR
Name FILIAN, MICHAEL
Address 7990 MAINLINE PARKWAY
City-State-Zip: FORT MYERS FL 33912

Title CEO
Name PARRY, DAVID M
Address 46 LIZOTTE DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title MANAGER
Name LAPORTE, STEVEN
Address 46 LIZOTTE DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title FLORIDA VP OF OPERATIONS
Name GORDON, MICHAEL
Address 46 LIZOTTE DRIVE
City-State-Zip: MARLBOROUGH MA 01752

Title CERTIFIED PLUMBING CONTRACTOR
Name RICE, DONALD
Address 3100 SE WAALER ST
City-State-Zip: STUART FL 34997

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY STRONG

CONTROLLER

01/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title CERTIFIED PLUMBING CONTRACTOR
Name CONNER, JAMES
Address 8892 NORMANDY BLVD
City-State-Zip: JACKSONVILLE FL 32221

Title REGISTERED SEPTIC TANK CONTRACTOR
Name WATSON, TODD
Address 13801 66TH STREET
City-State-Zip: LARGO FL 33771

Title REGISTERED SEPTIC TANK CONTRACTOR
Name STEEN, TAMMY
Address 4949 N. ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32810

Title FLEET ADMINISTRATION MANAGER
Name BAIRD, MICHAEL
Address 1997 BEDFORD ST
City-State-Zip: BRIDGEWATER MA 02324

Title REGISTERED SEPTIC TANK
CONTRACTOR
Name SABINS, DUSTIN
Address 224 NE 16TH AVE
City-State-Zip: GAINESVILLE FL 32601

Title VP OF OPERATIONS
Name FARRELL, MARK
Address 223 CENTRAL FLORIDA PARKWAY
City-State-Zip: ORLANDO FL 32824

Title CERTIFIED PLUMBING CONTRACTOR
Name WOODRUFF, DEREK
Address 4949 N. ORANGE BLOSSOM TRAIL
City-State-Zip: ORLANDO FL 32810