PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # HR4315

1. Corporation FLORIDA	ENVIRONMENTAL, INC.										
Principal Place of Business Mailing Address						Ì					
% JACK O. HACKETT 11 ESO. P.O. DRAWER 1447		P.O BOX DRAWER 511447 PUNTA GORDA FL 33951 US				DO NOT WRITE IN THIS SPACE					
PUNTA GORDA	FL 33951	US				ŀ	3. Date Incorporated or Qualifed		`,		
							11/01/1985				
2. Principal Pi	ace of Business	2a.	. Mailing Address				4. FEI Number		pplied For		
21		26					59-2612208	I N	lot Applicable		
Suite, Apt. #, etc.		1	Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional		
22		27	The second secon				S. Country of Country position	Fee F	gequired		
City & State		<u></u>	City & State				6. Election Campaign Financing		May Be		
23		28					Trust Fund Contribution Added to Fees				
Zip Country		<u></u>	Zip Country				8. This corporation owes the current year Intangible Personal Property Tax.				
24	25	29	30				Personal Property Tax. 10. Name and Address of New Registered				
	9. Name and Address of Current	Regis	itered Agent	81	Name		To. Name and Address of New Registered	Main			
HACI	KETT, JACK O.,II, ESQUIRE										
115 W. OLYMPIA AVE.				82	Street A	Addres	Idress (P.O. Box Number is Not Acceptable)			ı	
PUNTA GORDA FL 33950				83						ı	
. •••										ł	
				84	City		FI	85 Zip	Code	i	
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	t Hiona	da. Such change was author ; Section 607.0505, Florida (nzed by Statutes.	trie corpo	irauori	ation submits this statement for the purpose o 's board of directors. I hereby accept the appo	f changing is intment as i	ts registered registered		
	Signature, typed or printed name of registered agent				nt signature re	equired w	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	OPS IN 12	i	
12.	OFFICERS AND	DIRE		13.			ADDITIONS/CHANGES TO OFFICERS A	Change		. :	
TITLE	PD PONTE IN	•		1.1 TITLE				(_) -··-·a-			
NAME	ROSS, DONALD H.				I.2 NAME					. !	
STREET ADDRESS	18419 MEYER AVE			1.3 STREET ADDRESS			•		ĵ	1 	
CITY-ST-ZIP	PORT CHARLOTTE FL			1.4 CITY-S		T/CT	-	Change	Addition	ł	
TITLE	ST ANDROW			2.1 TITLE		VST		A_A-IIII-		ĺ	
NAME	DODD, ANDREW			2.2 NAME						Į	
STREET ADDRESS	18050 VANDERBUILT DRIVE			2.3 STREET	1				(ſ	
CITY-ST-ZIP	PORT CHARLOTTE FL	-		2: 4 CITY-S 3.1 TITLE	iT-ZIP	-	روزه المنطق المنظم ا	Change	Addition	,	
TITLE	ACCIED CHADILLE 1 ID	-		3.2 NAME			The state of the s		- "	ت	
NAME	KOCUR, CHARLES L., JR.				r AODDECE					1	
STREET ADDRESS	27148 VILLARRICA DR.			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP					Ţ	l	
CITY-ST-ZIP	FUNTA GUNDA FL				1 TITLE V			☐ Change	x XXAddition	ĺ	
				4. 2 NAME		Br	enda W. Cesario			ĺ	
NAME					ADDRESS		41 Sabal Trace Drive				
STREET ADDRESS				4.4 CITY-S			orth Port, Florida 34287	,		ĺ	
CITY-ST-ZIP TITLE				5.1 TITLE	,	1102 CH 1 01 01 1 201 200 275		Change	Addition		
NAME				5.2 NAME						1	
STREET ADDRESS			j	5.3 STREET	r address		·			l	
	·			5.4 CITY-S					I	ł	
CITY-ST-ZIP TITLE			☐ DELETE 6.1 TIT					☐ Change	Addition	ı	
	l		1		1					ł	

14. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP



FILED

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90098 028 ***150.00