

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 293580

FILED  
May 22, 2009  
Secretary of State

Entity Name: FORWARD ENGINEERING, INC.

**Current Principal Place of Business:**

6565 BEACH BLVD  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 16553  
JACKSONVILLE, FL 32245

**New Mailing Address:**

FEI Number: 59-1112086      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STOKER, GARY L.  
4177 STACEY ROAD  
JACKSONVILLE BCH., FL 32250      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTV ( ) Delete  
Name: STOKER, GARY L.  
Address: 4177 STACEY ROAD  
City-St-Zip: JACKSONVILLE BEACH, FL

Title: S ( ) Delete  
Name: HOLBROOK, LEON  
Address: 6849 LA LOMA DR  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: STOKER, GARY L  
Address: 4177 SACEY RD W.  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D ( ) Delete  
Name: HOLBROOK, LEON  
Address: 6849 LA LOMA DR.  
City-St-Zip: JACKSONVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY L. STOKER

PRES

05/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date