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PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

K69486 DOCUMENT #

certify that the information indicated on this angular report oath; that I am an officer or greator of the origination of appears in Block 12 or Block 13 if changed, or on an area

SIGNATURE AND TYPES

SIGNATURE:

STONE, JOCA & MAHONEY, CONSULTING ENGINEERS, INC

Principal Place of Business Mailing Address % JOHN J. MAHONEY, III % JOHN J. MAHONEY, N 1730 KINGSLEY AVE., SUITE D 1730 KINGSLEY AVE., SUITE D **ORANGE PARK FL 32073** ORANGE PARK FL 32073 3a. Date of Last Report 3. Date Incorporated or Qualified 03/01/1989 04/28/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2935824 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Ant. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MAHONEY, JOHN J., III Street Address (P.O. Box Number is Not Acceptable) 82 1730 KINGSLEY AVE. 83 SUITE D **ORANGE PARK FL 32073** Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature types or protectioner of registral agest and the it assertable (fault). Bug there !! Agent argulatine research when resistating? CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change | ☐ Addition 1.111116 TITLE 1.2 NAME NAME MAHONEY, JOHN JOSEPH III 1730 KINGLSEY AVE. #D 1.3 STREET ADDRESS STREET ADDRESS ORANGE PARK FL 1.4 C:TY - ST - ZIP CITY - ST-ZIP DELFTE 2 1 10°LE [] Change ☐ Addition TITLE JOCA, STEPHEN PAUL 2.2 NAME NAME STREET ADDRESS 1730 KINGSLEY AVE. #D 2.3 STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 2.4 CITY - \$1 - ZiP DELETE ☐ Addition 3 1 THEE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CiTY - ST - ZiF CITY: ST: 7IE Change Addition DELETE 4 1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP DITY-ST ZIP DELETE Change Addition 5 1 7/11 5 TITLE NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP TT DELETE Change ☐ Add:tren 6 1 TITLE DILE 6.2 NAMS NAME 6.3 STREET ADDRESS STREET ADDRESS 64 01' Y - S* 7/P CHTY-ST-ZIP ing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida Statutes I further or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name 14. I do hereby certify that the information expolice with

STEPHEN P. JOCA, PRES 4/24/96