

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K69486

FILED
Jan 30, 2002 8:00 AM
Secretary of State

Entity Name: STONE, JOCA & MAHONEY, CONSULTING ENGINEERS, INC.

Current Principal Place of Business:

% JOHN J. MAHONEY, III
1730 KINGSLEY AVE., SUITE D
ORANGE PARK, FL 32073

New Principal Place of Business:

7400 BAYMEADOWS WAY
SUITE 220
JACKSONVILLE, FL 32256

Current Mailing Address:

% JOHN J. MAHONEY, III
1730 KINGSLEY AVE., SUITE D
ORANGE PARK, FL 32073

New Mailing Address:

7400 BAYMEADOWS WAY
SUITE 220
JACKSONVILLE, FL 32256

FEI Number: 59-2935824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHONEY, JOHN J., III
1730 KINGSLEY AVE.
SUITE D
ORANGE PARK, FL 32073

Name and Address of New Registered Agent:

MAHONEY, JOHN J. III PRES.
7400 BAYMEADOWS WAY
SUITE 220
JACKSONVILLE, FL 32256

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: JOHN J. MAHONEY III

01/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MAHONEY, JOHN JOSEPH, III
Address: 1730 KINGLSEY AVE. #D
City-St-Zip: ORANGE PARK, FL

Title: D () Delete
Name: JOCA, STEPHEN PAUL,
Address: 1730 KINGSLEY AVE. #D
City-St-Zip: ORANGE PARK, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: MAHONEY, JOHN J PRES
Address: 7400 BAYMEADOWS WAY, SUITE 220
City-St-Zip: JACKSONVILLE, FL 32256

Title: O (X) Change () Addition
Name: JOCA, STEPHEN P EXEC VP
Address: 7400 BAYMEADOWS WAY, SUITE 220
City-St-Zip: JACKSONVILLE, FL 32256

Title: O () Change (X) Addition
Name: BUCHANAN, NANCY D SECY
Address: 7400 BAYMEADOWS WAY, SUITE 220
City-St-Zip: JACKSONVILLE, FL 32256

Title: O () Change (X) Addition
Name: MCQUADE, DONNA M TREAS
Address: 7400 BAYMEADOWS WAY, SUITE 220
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONNA M. MCQUADE

TRES

01/30/2002

Electronic Signature of Signing Officer or Director

Date