


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000135547

1. Entity Name
MCCREE ARCHITECTS & ENGINEERS, INC.



Principal Place of Business Mailing Address

500 E PRINCETON ST **500 E PRINCETON ST**
ORLANDO, FL 32803-1449 **ORLANDO, FL 32803-1449**



04132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-3890102 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MCCREE, RICHARD T SR
500 E PRINCETON ST
ORLANDO, FL 32803-1449

INS. OK

PROJ. #01-51-84120

CC

TYPE

REL. LIEU

P/F/NONE

DUE DATE 4-12-06

EXTRA

DO NOT WRITE IN THIS SPACE

POSTED BY
APR 14 2006
ACCOUNTING DEPT.

8. 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, I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and fee payable

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	MCCREE, RICHARD T SR
STREET ADDRESS	500 E PRINCETON ST
CITY-ST-ZIP	ORLANDO, FL 328031449
TITLE	PTD
NAME	MCCREE, RICHARD T JR
STREET ADDRESS	500 E PRINCETON ST
CITY-ST-ZIP	ORLANDO, FL 328031449
TITLE	VSD
NAME	GAINES, RICHARD L
STREET ADDRESS	500 E PRINCETON ST
CITY-ST-ZIP	ORLANDO, FL 328031449
TITLE	D
NAME	GRIFFIN, THOMAS F
STREET ADDRESS	500 E PRINCETON ST
CITY-ST-ZIP	ORLANDO, FL 328031449
TITLE	D
NAME	ROBERTSON, JOE O
STREET ADDRESS	500 E PRINCETON ST
CITY-ST-ZIP	ORLANDO, FL 328031449
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

05/05/06-80105-1008 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard T. McCreedy, Jr 4/14/06 407 848-4821

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #