

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P03747** (3)

1. Corporation Name

DAVID GERARDUZZI ENGINEERS, INC.



Principal Place of Business

1970 E. NINE MILE ROAD
FERNDALE MI 48220

Mailing Address

1970 E. NINE MILE ROAD
FERNDALE MI 48220

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
10/19/1984

3a. Date of Last Report
03/20/1995

4. FEI Number
38-1909216

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature of registered agent or the person filing with the state

Signature of a director or officer of the corporation (required)

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	PD GERARDUZZI, DAVID F.	<input type="checkbox"/> DELETE
12.2	STREET ADDRESS	2780 INDIAN MOUND S.	
12.3	CITY, ST, ZIP	BIRMINGHAM MI	
12.4	TITLE	SVD	<input type="checkbox"/> DELETE
12.5	NAME	GERARDUZZI, MARGARET P.	
12.6	STREET ADDRESS	2780 INDIAN MOUND S.	
12.7	CITY, ST, ZIP	BIRMINGHAM MI	
12.8	TITLE		<input type="checkbox"/> DELETE
12.9	NAME		
12.10	STREET ADDRESS		
12.11	CITY, ST, ZIP		
12.12	TITLE		<input type="checkbox"/> DELETE
12.13	NAME		
12.14	STREET ADDRESS		
12.15	CITY, ST, ZIP		
12.16	TITLE		<input type="checkbox"/> DELETE
12.17	NAME		
12.18	STREET ADDRESS		
12.19	CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY, ST, ZIP	
13.5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY, ST, ZIP	
13.9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY, ST, ZIP	
13.13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information provided 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 in an attached form with an address.

SIGNATURE:

David F. Gerarduzzi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96

810-541-2250
Division Phone

CR2E034 (12/95)