

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127751

FILED  
May 01, 2007  
Secretary of State

Entity Name: WORCESTER ENGINEERING, INC.

**Current Principal Place of Business:**

806 NE 11TH AVENUE  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

1036 KINGFISHER WAY  
ROCKLEDGE, FL 32955 US

**Current Mailing Address:**

P. O. BOX 335  
HOWEY-IN-THE-HILLS, FL 34737 US

**New Mailing Address:**

FEI Number: 75-3079391      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BETTER BOOKS & TAXES, INC.  
8431 ORANGE BLOSSOM ROAD  
HOWEY-IN-THE-HILLS, FL 34737 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: PDS ( ) Delete  
Name: WORCESTER, JOSEPH  
Address: P. O. BOX 335  
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737 US

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

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: JOSEPH WORCESTER

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05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date