

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

55 MAY -1 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S67577 (4)

1. Corporation Name

SIMS WILKERSON ENGINEERING, INC.

Principal Place of Business

800 SOUTH ORLANDO AVE.
STE 150
MAITLAND FL 32751
US

Mailing Address

800 SOUTH ORLANDO AVE.
STE 150
MAITLAND FL 32751
US

*CHANGED
SFE
BLOCK 2*

*CHANGED
SFE
BLOCK 2 A*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/19/1991

3a. Date of Last Report
04/27/1994

4. FEI Number
65-0281509

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

2. Principal Place of Business

21 **1555 Howell Branch Road**
Suite, Apt. #, etc.

2a. Mailing Address

26 **1555 Howell Branch Road**
Suite, Apt. #, etc.

22 **Suite A-1**
City & State

27 **Suite A-1**
City & State

23 **Winter Park, Florida**
Zip Country

28 **Winter Park, Florida**
Zip Country

24 **32789-1170** 25 **Orange**

29 **32789-1170** 30 **Orange**

9. Name and Address of Current Registered Agent

**SIMS, HOWARD W.
815 VISCAYA LANE
ALTMONTE SPRINGS FL 32701**

10. Name and Address of New Registered Agent

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 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Howard W. Sims

HOWARD W. Sims

4-28-95

(Signature, typed or printed name of registered agent, and date of appointment)

(NOTE: Registered Agent signature required when appointing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SIMS, HOWARD W.
STREET ADDRESS	815 VISCAYA LANE
CITY - ST - ZIP	ALTMONTE SPRINGS FL
TITLE	STD
NAME	WILKERSON, GARY A.
STREET ADDRESS	1831 THORNHILL CIRCLE
CITY - ST - ZIP	OVIEDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(g), Florida Statutes. I further certify that the information indicated 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 person 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 on an attachment with an address.

SIGNATURE:

Howard W. Sims
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Howard W. Sims

4/28/95
Date

**(407)
645-1566**
Telephone No.