

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 432569 (2)
1. Corporation Name
STOTTLER STAGG & ASSOCIATES, ARCHITECTS, ENGINEERS, PLANNERS, INC.

Principal Place of Business
8680 N ATLANTIC AVENUE
CAPE CANAVERAL FL 32920

Mailing Address
8680 N ATLANTIC AVENUE
CAPE CANAVERAL FL 32920



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/09/1973	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2734745	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired EX	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30	Yes No

9. Name and Address of Current Registered Agent STOTTLER, RICHARD H. JR. 8680 N. ATLANTIC AVENUE CAPE CANAVERAL FL 32920		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	
NAME	GALLARDO, ROBERT	1.2 NAME	
STREET ADDRESS	7980 N ATLANTIC AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	Director
NAME	STAGG, RICHARD T	2.2 NAME	
STREET ADDRESS	8680 N ATLANTIC AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	Treasurer
NAME	STOTTLER, RICHARD H JR	3.2 NAME	
STREET ADDRESS	8680 N ATLANTIC AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	3.4 CITY-ST-ZIP	
TITLE	STD	4.1 TITLE	Secretary/Director
NAME	DEEVERS, JUDITH C.	4.2 NAME	
STREET ADDRESS	8680 N ATLANTIC AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	4.4 CITY-ST-ZIP	
TITLE	VPD	5.1 TITLE	
NAME	PEKAR, JOHN A.	5.2 NAME	
STREET ADDRESS	8680 N. ATLANTIC AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	5.4 CITY-ST-ZIP	
TITLE	SRVD	6.1 TITLE	
NAME	KAZMIERCZAK, EUGENE J.	6.2 NAME	
STREET ADDRESS	8680 N ATLANTIC AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CANAVERAL FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 on an attachment with an address

SIGNATURE: *R.H. Stottler Jr.* Richard H. Stottler, Jr., Pres. 4/16/98 407/783-1320

CR2E034 (10/97)