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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **452788** (3)
1. Corporation Name
LONG & ASSOCIATES ENGINEERS/ARCHITECTS, INC.

Principal Place of Business
**3902 HENDERSON BLVD., SUITE 203
TAMPA FL 33629**

Mailing Address
**3902 HENDERSON BLVD., SUITE 203
TAMPA FL 33629-5034**

3. Date Incorporated or Qualified 05/10/1974	3a. Date of Last Report 02/01/1996
4. FEI Number 59-1535380	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	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent
**LONG, H.M., JR.
10 BISHOP CREEK DR.
SAFETY HARBOR FL 34695**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0503 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 Long, Jr., and accept the obligation of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **Harry M. Long, Jr., President** 1-7-97
(NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	LONG, H.M., JR.	
STREET ADDRESS	10 BISHOP CREEK DR.	
CITY-ST-ZIP	SAFETY HARBOR FL	
TITLE	V	☐ DELETE
NAME	VOIGTMANN, ORIS L.	
STREET ADDRESS	5225 TRAPNELL ROAD	
CITY-ST-ZIP	DOVER FL	
TITLE	ST	☐ DELETE
NAME	FRULAND, ROBERT M.	
STREET ADDRESS	7128 S. SHORE DRIVE	
CITY-ST-ZIP	S. PASADENA FL	
TITLE	V	☐ DELETE
NAME	JOHNS, NATHAN	
STREET ADDRESS	4301 SALTWATER BLVD.	
CITY-ST-ZIP	TAMPA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
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 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, all on an attachment with an address

SIGNATURE: *[Signature]* **ORIS L. VOIGTMANN V.P.** 1/10/97 (813) 251-1095
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)