

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 631693

1. Entity Name
CHARLOTTE ENGINEERING AND SURVEYING, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 14 AM 8:46

Principal Place of Business
**1700 EL JOBEAN ROAD
PORT CHARLOTTE, FL 33948**

Mailing Address
**1700 EL JOBEAN ROAD
PORT CHARLOTTE, FL 33948**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09122006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

59-1938257

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCIVER, RICHARD S
1505 N. FLORIDA AVE.
TAMPA, FL 33602**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$81.25

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DC
DOHERTY, KENNETH W.
26068 CORUPANO DRIVE
PORT CHARLOTTE, FL 33983**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**PTSD
MENEN, JOSEPH S
1640 BAYSHORE DRIVE
ENGLEWOOD, FL 342231506**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
VICKSTRON, DANIEL M
505 20TH AVENUE NE
SAINT PETERSBURG, FL 33704**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
SWEN, JOHN T
22406 WALTON AVENUE
PORT CHARLOTTE, FL 33952**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**V
PAYNE, KEVIN L
4710 LAGORCE DR
PUNTA GORDA, FL 33982**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

**700079940427
09/19/06--01017--011 **70.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D/C/P/T/S

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VICKSTROM, DANIEL M

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph S. Menen, D/C/P/T/S

09/13/06

Date

941-629-2552

Daytime Phone #