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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

744026

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ENGINEERS OF CAPE CORAL, INC.

Suite, Apt. #, etc. Suite, Apt. #, etc. 27 Additional Sc. Confidence of Status Desired Sc. Election Campaign Financing Thus Eurol Contribution The Required Sc. Did Nay Be Added to Fees	Principal Place of Business Mailing Address					T DEMAIN TORAN EIGHT BEFOR BYEN BYEN BYEN BYEN BYEN BYEN BYEN BYEN				
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Surie, Apt. #, etc. Surie, Apt. #, etc.	2. Principal Pl	lace of Business	2a. Mailing Address							Applied For
City & State City	21		26	26			59-2442065 Not Applicable			
Zip	Suite, Apt.	#, etc.	· · · · ·	hand it is a			5. Certificate of Status Desired	7		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name ARRASMIT, GRANT H. 4012 SE 19TH AVENUE SUITE C203 CAPE CORAL FL 33904 12. Pursuant to the provisions of Sections 617,0502 and 617,1508, 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. Submit dealth of the purpose of changing its registered office or registered agent, or both, in the State of 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 Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familier with, and accept the obligations of Section 517,0502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or registered agent. I am familier with a statement for the purpose of changing its registered office or regist	City & State	е	—	—						
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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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

64 CITY-ST-ZIP

61 TITLE

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

CAPE CORAL FL

ARRASMITH, GRANT

4012 S.E. 19TH AVE., APT. C-203

SIGNATURE: 22 row 20 DUCY 100 mills SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

Apr. 1 23,1996 941/9450466

62 NAME ARRAGMITH GRANT 63 STREET ADDRESS 4012 SE 19 TH AVE, APT C203

CAPE CORAL FL 33904

Change Addition

CR2E037 (12/95)