

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 804834 (0)

1. Corporation Name

BCM ENGINEERS INC.

Principal Place of Business

108 ST. ANTHONY STREET
MOBILE AL 36602

Mailing Address

P.O. BOX 1784
MOBILE AL 36633-1784



2. Principal Place of Business

2a. Mailing Address

21 63 S. Royal Street

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 200

27

City & State

City & State

23 Mobile, AL 36601

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/22/1937

3a. Date of Last Report

02/21/1995

4. FEI Number

63-0730359

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$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

10. Name and Address of New Registered Agent

GOIN, JOHN E
570 GRACE AVENUE
PANAMA CITY FL 32401

81 Name

Billy R. Perry

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

570 Grace Avenue

83

84 City

Panama City

FL

85 Zip Code

32401

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

Billy R. Perry

(Note: Registered Agent Signature is required on this filing)

3/18/96

12. OFFICERS AND DIRECTORS

TITLE P
NAME CONNER, R C
STREET ADDRESS ONE PLYMOUTH MEETING
CITY-ST-ZIP PLYMOUTH MEETING PA ☒ DELETE

TITLE AVP
NAME MCGRAW, K R
STREET ADDRESS 108 ST ANTHONY STREET
CITY-ST-ZIP MOBILE AL ☒ DELETE

TITLE VD
NAME WRIGHT, D. B.
STREET ADDRESS 108 ST. ANTHONY STREET
CITY-ST-ZIP MOBILE AL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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 63 S. Royal Street, Suite 200
3.4 CITY-ST-ZIP Mobile, AL 36601

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME Senior V.P.
4.3 STREET ADDRESS William E. Wilkerson
4.4 CITY-ST-ZIP 63 S. Royal Street, Suite 200
Mobile, AL 36601

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME Larry Andersen
5.3 STREET ADDRESS One Plymouth Meeting
5.4 CITY-ST-ZIP Plymouth Meeting, PA 19462

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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE

James B. Wilkerson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/96

(334) 433-3981

CR2E034 (12/95)