FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **816727** **(2)**

1. Corporation Name

MCKEE ENGINEERING COMPANY INC

200001479992
-05/09/95--01020--003
****200.00 ****200.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3725 INDUSTRIAL PARK DR. MARIANNA FL 32446	3725 INDUSTRIAL PARK DR. MARIANNA FL 32446

3. Date Incorporated or Qualified: **02/25/1963**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) County (25) Zip (29) County (30)

4. FEI Number: **35-0851216** ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TOMAN,JOSEPH A
3076 WALNUT LN
MARIANNA FL 32446

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	11 TITLE	C/D	☒ Change ☐ Addition
NAME	MCKEE, MURRAY P	12 NAME	MCKEE, MURRAY P.	
STREET ADDRESS	4425 MEANDERING WAY	13 STREET ADDRESS	4425 MEANDERING WAY	
CITY ST ZIP	TALLAHASSEE FL	14 CITY ST ZIP	TALLAHASSEE, FL 32308	
TITLE	PD	21 TITLE	P/D	☒ Change ☐ Addition
NAME	TOMAN, JOSEPH A	22 NAME	TOMAN, JOSEPH A.	
STREET ADDRESS	3076 WALNUT LANE	23 STREET ADDRESS	3076 WALNUT LANE	
CITY ST ZIP	MARIANNA, FL 00000	24 CITY ST ZIP	MARIANNA, FL 32446	
TITLE	SD	31 TITLE	S/D	☒ Change ☐ Addition
NAME	TOMAN, JOYCE M	32 NAME	TOMAN, JOYCE M.	
STREET ADDRESS	3076 WALNUT LANE	33 STREET ADDRESS	3076 WALNUT LANE	
CITY ST ZIP	MARIANNA, FL 00000	34 CITY ST ZIP	MARIANNA, FL 32446	
TITLE	TD	41 TITLE	T/D	☒ Change ☐ Addition
NAME	MCKEE, VIRGINIA S	42 NAME	MCKEE, VIRGINIA S.	
STREET ADDRESS	4425 MEANDERING WAY	43 STREET ADDRESS	4425 MEANDERING WAY	
CITY ST ZIP	TALLAHASSEE FL	44 CITY ST ZIP	TALLAHASSEE, FL 32308	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

SBM 5/1

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)(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: Joseph A. Toman 4-21-95 904/526-2260
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JOSEPH A. TOMAN

0411218 FP