2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## JAug 09, 2005 08:00 AM Secretary of State DOCUMENT # 838444 1. Entity Name JACKSON AND TULL CHARTERED ENGINEERS CORPORATION Principal Place of Business Mailing Address 2705 BLADENSBURG RD NE 2705 BLADENSBURG RD NE WASHINGTON DC 20018 WASHINGTON DC 20018 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E034 (10/04) City & State Applied For City & State 4. FEI Number 52-1004080 Not Applicable Zip Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND ROAD PLANTATION FL 33324 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) CATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. 1411 ☐ ∩elete TITLE Change ☐ Addillon NAME TULL, KNOX W., JR., P.E. 2805 - 33RD ST., SE STREET ADDRESS STREET ADDRESS WASHINGTON DC 20020 CHY-ST-ZIP CITY-ST-7IP HILE S Delete TITLE ☐ Change Addition TULL, BRENDA T. NAME NAME STREET ADDRESS 2805 - 33RD ST., SE STREET ADDRESS CITY - ST - 7IP WASHINGTON DC 20020 CHTY-ST-7IP ☐ Delete TITLE ☐ Change Addition THEF U00000376012 NAME NAME 08/09/05-80002-009 550.00 STREET ADDRESS STREET ADDRESS CITY-ST ZIP CITY-ST ZIP TITLE Change ☐ Addition TITLE Delete STREET ADDRESS STREET ADDRESS CHY-SI-ZIE CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP Delete, TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET AUDRESS CITY ST-ZIP City-St-ZiP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE: Signature and Type Or Printed Name of Signing Officer on Director Toll 7/26/05 (202) 333-9100

changed, or on an attachment with an address, with all other like empowered.