

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F04000001390

FILED  
May 21, 2007  
Secretary of State

Entity Name: MULKEY ENGINEERS & CONSULTANTS, INC.

## Current Principal Place of Business:

10175 FORTUNE PARKWAY  
SUITE 405  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 33127  
RALEIGH, NC 27636

## New Mailing Address:

FEI Number: 56-1839575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MULKEY, BARBARA H PE  
Address: 434 FAYETTEVILLE STREET, SUITE 2010  
City-St-Zip: RALEIGH, NC 27601

Title: S ( ) Delete  
Name: HOOD, WILLIS S PE  
Address: 434 FAYETTEVILLE STREET SUITE 2010  
City-St-Zip: RALEIGH, NC 27601

Title: VT ( ) Delete  
Name: HEATH, JILL WELLS  
Address: 434 FAYETTEVILLE STREET, SUITE 2010  
City-St-Zip: RALEIGH, NC 27601

Title: D ( ) Delete  
Name: VAN POOL, GARRY C  
Address: 3431 BABICHE STREET  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D ( ) Delete  
Name: ROBERT, LISA PE  
Address: 3431 BABICHE STREET  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: VAN POOL, GARRY C  
Address: 10175 FORTUNE PARKWAY SUITE 405  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change ( ) Addition  
Name: ROBERT, LISA PE  
Address: 10175 FORTUNE PARKWAY SUITE 405  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JILL WELLS HEATH

VT

05/21/2007

Electronic Signature of Signing Officer or Director

Date