

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2005 8:00 am
Secretary of State

09-07-2005 90010 002 ***550.00

DOCUMENT # F04000002224

1. Entity Name
ENGINEERING & PLANNING RESOURCES, P.C.



Principal Place of Business
9602 BOBWHITE WAY
PENSACOLA, FL 32514

Mailing Address
312 EAST NINE MILE RD STE 20
PMB 411
PENSACOLA, FL 32514

14019349



2. Principal Place of Business

3. Mailing Address

9602 Bobwhite Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02032005 Chg-P CR2E034 (10/03)

City & State

Pensacola, FL

4. FEI Number
86-1095202

Applied For
Not Applicable

Zip

Country

32514

Country

US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLAYER, BONITA
9602 BOBWHITE WAY
PENSACOLA, FL 32514

Name

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

City

FL

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

Bonita Player

9/2/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CVS
PLAYER, BONITA
101 EAST TEN MILE ROAD, APT. K
PENSACOLA, FL 32534 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CVS
Bonita Player
9602 Bobwhite Way, Pensacola, FL ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPT
WUENSCH, LYNETTE
2819 WATKINS LANDING ROAD
MIDLOTHIAN, VA 23113 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bonita Player (BONITA Player)

9/2/05 (850) 411-9879

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #