## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04560

City-St-Zip:

FILED Apr 29, 2004 Secretary of State

Entity Name: TANK ENGINEERING AND MANAGEMENT CONSULTANTS, INC.

**Current Principal Place of Business:** New Principal Place of Business: 1419 WEST WATERS AVE 5808 BRECKENRIDGE PKWY STE 114 STE A TAMPA, FL 33604 TAMPA, FL 33610 **Current Mailing Address: New Mailing Address:** 1419 WEST WATERS AVE 5808 BRECKENRIDGE PKWY STE 114 STE A TAMPA, FL 33604 US TAMPA, FL 33610 US FEI Number: 59-2043623 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAINS, JOHN H III % JOHN H. RAINS III. P.A. 501 E. KENNEDY BLVD., SUITE 750 TAMPA, FL 33602 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change ( ) Addition ( ) Delete Title: PANDOLPH, JAMES E, PANDOLPH, JAMES E EXEC VP Name: Name: 1419 W WATERS AVE., STE 114 5808 BRECKENRIDGE PKWY STE A Address: Address: City-St-Zip: TAMPA FL City-St-Zip: **TAMPA FL 33610** Title: (X) Change ( ) Addition Title: () Delete Name: COLETTE N PANDOLPH. Name: PANDOLPH, COLETTE N PRES 1419 W. WATERS AVE #114 5808 BRECKENRIDGE PKWY STE A Address: Address: TAMPA, FL 33604 TAMPA, FL 33610 City-St-Zip: City-St-Zip: Title: Title: **VPMO** ( ) Delete **VPMO** (X) Change ( ) Addition KITCHEN, JEFFERY W KITCHEN, JEFFERY W VPMO Name: Name: 1419 W. WATERS AVE. #114 5808 BRECKENRIDGE PKWY STE A Address Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: TAMPA, FL 33610 Title: () Delete Title: ( ) Change (X) Addition PANDOLPH, JAMES E SECTRES Name: Name: Address: Address: 5808 BRECKENRIDGE PKWY STE A

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

TAMPA, FL 33610

SIGNATURE: COLETTE N. PANDOLPH P 04/29/2004