

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F07089** (8)

1. Corporation Name
ANCHOR ENGINEERING CONSULTANTS, INC.



Principal Place of Business: **4091 COLONIAL BLVD. FORT MYERS FL 33912**
Mailing Address: **4091 COLONIAL BLVD. FORT MYERS FL 33912**

3. Date Incorporated or Qualified: **11/04/1980**
3a. Date of Last Report: **03/02/1995**

2. Principal Place of Business: **4091 Colonial Blvd Suite 100**
2a. Mailing Address: **4091 Colonial Blvd Suite 100**
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country

4. FEI Number: **61-0981067**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**LEWIS, RICHARD G.
4091 COLONIAL BLVD.
FORT MYERS FL 33912**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable): **4091 Colonial Boulevard, Suite 100**
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	ELY, GEORGE M.	
STREET ADDRESS	620 EUCLID AVE.	
CITY - ST - ZIP	LEXINGTON KY	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	PARROTT, GEORGE D.	
STREET ADDRESS	620 EUCLID AVE.	
CITY - ST - ZIP	LEXINGTON KY	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	FECITT, DAVID G.	
STREET ADDRESS	129 SW 54TH TERR.	
CITY - ST - ZIP	CAPE CORAL FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LEWIS, RICHARD G.	
STREET ADDRESS	13590 ADMIRAL COURT	
CITY - ST - ZIP	FT. MYERS FL	
TITLE	AST	<input type="checkbox"/> DELETE
NAME	LEWIS, VICKIE L.	
STREET ADDRESS	13590 ADMIRAL COURT	
CITY - ST - ZIP	FORT MYERS FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	JONES, EDEL T.	
STREET ADDRESS	68 SOUTH MAIN ST	
CITY - ST - ZIP	WINCHESTER KY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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)(k), 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: *Richard G. Lewis* Richard G. Lewis 2/15/96 941/936-4003
Date Daytime Phone #

CR2E034 (12/95)

February 15, 1996

Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, Florida 32302-1500

RE: Corporation Annual Report 1996
Attachment of Additional Officers and Directors
Block #13

Title: T/D
Name: Robert L. Baldwin
Address: 116 South Highland
Winchester, KY

Title: V
Name: Lawrence M. Williams
Address: 118 Delaware Road
Lehigh Acres, FL

Title: V/D
Name: Michael E. Lastovica
Address: 634 Astarias Circle, SW
Fort Myers, FL