


**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

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**Feb 19 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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. SUITE #100 FORT MYERS FL 33912 US  
Mailing Address: 4091 COLONIAL BLVD. SUITE #100 FORT MYERS FL 33912-1000 US

3. Date Incorporated or Qualified: 11/04/1980  
3a. Date of Last Report: 02/20/1996  
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

2. Principal Place of Business (21-24)  
2a. Mailing Address (25-30)

9. Name and Address of Current Registered Agent  
**LEWIS, RICHARD G.  
4091 COLONIAL BLVD.  
SUITE #100  
FORT MYERS FL 33912**

10. Name and Address of New Registered Agent (81-85)  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELY, GEORGE M.	1.2 NAME	
STREET ADDRESS	620 EUCLID AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	LEXINGTON KY	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARROTT, GEORGE D.	2.2 NAME	
STREET ADDRESS	620 EUCLID AVE.	2.3 STREET ADDRESS	872 Robin Road
CITY-ST-ZIP	LEXINGTON KY	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FECITT, DAVID G.	3.2 NAME	
STREET ADDRESS	129 SW 54TH TERR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	3.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, RICHARD G.	4.2 NAME	
STREET ADDRESS	13590 ADMIRAL COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	4.4 CITY-ST-ZIP	
TITLE	AST <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, VICKIE L.	5.2 NAME	
STREET ADDRESS	13590 ADMIRAL COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	5.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, EDSSEL T.	6.2 NAME	
STREET ADDRESS	68 SOUTH MAIN ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINCHESTER KY	6.4 CITY-ST-ZIP	

14. I do 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 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 2/12/97 941/936-4003  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

February 12, 1997

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

RE: Corporation Annual Report 1997  
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: 1228 Archdale Street  
Lehigh Acres, FL

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