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

CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	Jal Report 1997	100		Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
DOCUMENT # F31312 (4) KUHLMAN ENGINEERING, INC.						1					
Principal P-ac	e of Business		Mailii	ng Address				# 1888/100 /100 1108/ 1400 1166 1466 1			
2647 DAVIS BLVD Naples FL 33942				2647 DAVIS BLVD NAPLES FL 34104-4332							
								3. Date Incorporated or Qualified 04/20/1981		e of Last R 9/1996	eport
2. Principal Place of Business				2a. Mailing Address				4, FEI Number 59-2100021			plied For t Applicable
Suite, Apt	#, etc		S	uite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional
City & Stat	le .		27 C	City & State				6. Election Campaign Financing		\$5.00	 (
Zip		Country	28 Z	ip .	Cou	ntry		Trust Fund Contribution 8. This corporation has liability for	intangible t	Added t ax under s	
24	25	444	29		30	7818.4		Florida Statutes] Yes □	No	
KUH	LMAN, JAMES	Address of Cl	urrent Register	reo Agent	·····	81 Name		10. Name and Address of New Re	gistered A	gent	
26 V	VATERCOLOR V	WAY				82 Street	Addres	ss (P.O. Box Number is Not Acceptat	bie)		
NAP	LES FL 33942					83					
					Į.	44 00					
						84 City			FL	85 Zip (
11. Pursuant office or r	to the provisions registered agent.	of Sections 607 or both, in the 9	7.0502 and 6 07 State of Florida	.1508, Florida Sta Such change wa	itutes, the at	pove-named	corpor	ration submits this statement for the p	ourpose of o	changing it	s registered
office or r agent. La	to the provisions registered agent on familiar with, a	of Sections 607 or both, in the 9 nd accept the c	7.0502 and 607 State of Florida obligations of, S	.1508, Florida Sta . Such change wa Section 607.0505,	ututes, the at as authorized Florida Stat	pove-named	corpor poration	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of o	changing it	s registered
office or r agent Ta SIGNATURE	to the provisions registered agent on familiar with, ai Signature typed in pro	or both, in the 6 nd aboept the c	State of Florida obligations of, S cologen and stort a	Such change was section 607.0505,	as authorized Florida Stat NOTE: Registered	pove-named by the cor- utes.	poration	n's board of directors. I hereby acceptive the state of t	DUTPOSE of optithe appo	changing it intment as	s registered registered
office or r agent. La	reg-stered agent, im familiar with, ai	or both, in the 6 nd aboept the c	State of Florida obligations of, S	Such change was section 607.0505,	as authorized Florida Stat	pove-named by the cor- utes.	poration	n's board of directors. I hereby accep	DUTPOSE of optithe appo	changing it intment as	s registered registered
office or r agent Ta SIGNATURE	registered agent, on familiar with, an signature types or pro	or both, in the find accept the control manie of register OFFICERS	State of Florida obligations of, S cologen and stort a	Such change wa Section 607.0505, applicable (N	as authorized Florida Stat NOTE: Registered	Dove-named by the cor- utes. Agent signature	poration	n's board of directors. I hereby acceptive the state of t	DUTPOSE of optithe appo	changing it intment as	s registered registered
office or ragent Ta SIGNATURE 12.	registered agent in familiar with, as Signature types to per ST SNEED, DAVII 4835 DEVON	or both, in the send accept the common name of register OFFICERS D C CIRCLE	State of Florida obligations of, S cologen and stort a	Such change wa Section 607.0505, applicable (N	AS authorized Florida State NOTE: Registered 13.	Dove-named by the cor- utes. Agent signature	poration	n's board of directors. I hereby acceptive the state of t	DUTPOSE of optithe appo	changing it intment as	s registered registered
office or ragent Tale SIGNATURE 12. THE NAME STREET ADDRESS CHY-SI-7IP	registered agent, on familiar with, an signature types or pro	or both, in the send accept the common name of register OFFICERS D C CIRCLE	State of Florida obligations of, S cologen and stort a	Such change was Section 607.0505, implease (for ORS DELETE	sa authorize: Florida Stat NOTE: Registere: 13. 1.1 Ti 1.2 N/ 1.3 S1 1.4 Cl	Dove-named d by the cor- utes. d Agent signature TLE NME REET ADDRESS TY - ST - ZIP	poration	n's board of directors. I hereby acceptive the state of t	Durpose of opt the appo	changing it intment as DIRECTOR	s registered registered IS IN 12 Addition
office or ragent Tale SIGNATURE 12. THE NAME STREET ADDRESS DITY-ST-ZIP THE	ST SNEED, DAVI 4835 DEVON NAPLES, FL C	or both, in the send accept the conductive of register OFFICERS D C CIRCLE 200000	State of Florida obligations of, S cologen and stort a	Such change wa Section 607.0505, applicable (N	ss authorizer Florida Stat NOTE: Registerec 13. 1.1 Ti 1.2 N/ 1.3 S1 1.4 Ci 2.1 Ti	Dove-named of by the corutes. If Agent signature If LE WME REET ADDRESS TY - ST - ZIP ILE	poration	n's board of directors. I hereby acceptive the state of t	Durpose of opt the appo	changing it intment as	s registered registered
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