

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F93000004402

1. Entity Name
**CHP & ASSOCIATES, CONSULTING ENGINEERS,
INCORPORATED**



Principal Place of Business
**7660 WOODWAY
SUITE 400
HOUSTON, TX 77063-518 US**

Mailing Address
**7660 WOODWAY
SUITE 400
HOUSTON, TX 77063-518 US**

DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number
74-1887135

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**THOMPSON, MICHAEL W
CHPA CONSTRUCTION SITE OFFICE
9808 INTERNATIONAL DR.
ORLANDO, FL 32819**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000117289

04/19/04-80013-022 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
POOLE, GARY Y
7660 WOODWAY SUITE 400
HOUSTON, TX 770631518**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STVP
DICKSON, RICHARD L
7660 WOODWAY, SUITE 400
HOUSTON, TX 770631518**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
GRANT, PATRICK C
7660 WOODWAY SUITE 400
HOUSTON, TX 770631518**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
KOOP, FREDERICK W
7660 WOODWAY, SUITE 400
HOUSTON, TX 770631518**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
SABRSULA, LARRY G
7660 WOODWAY, SUITE 400
HOUSTON, TX 770631518**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard L Dickson **Richard L Dickson** x 4/13/04 7139773430