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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

Principal Place of Business

RICHMOND VA 23250-0282

PO BOX 50282

DOCUMENT # F9600000764 (8)

Mailing Address

PO BOX 50282 RICHMOND VA 23250-0282

TECHNICAL FOUNDATIONS, INCORPORATED

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 54-1629420 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BARNER, FREEMAN W JR 631 US HWY 1 #410 Street Address (P.O. Box Number is Not Acceptable) 82 N PALM BCH FL 33408 83 84 City 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** Signature, typed or printed nacie of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DCPS DELETE Change ___ Addition 1.1 TILLE TITLE WELCH, RANDALL G 1.2 NAME NAME 1816 E CHAFFIN RD 1.3 STREET ADDRESS STREET ADDRESS **RICHMOND VA 23231** 1.4 CITY - ST - 7IP CITY-ST-ZIP Channe Addition DELETE 2.1 TITLE TITLE WELCH, RANDALL G 2.2 NAME NAME **1816 E CHAFFIN RD** STREET ADDRESS 2.3 STREET ADDRESS RICHMOND VA 23231 2 4 CiTY-ST-7IP CITY-ST-ZIP DELETE Change Addition 3.1 TIFLE TITLE ALTMAN, LES 3.2 NAME NAME 9421 SHERWOOD DR 3.3 STREET ADDRESS STREET ADDRESS **QUINTON VA 23141** 3.4. CITY - ST - ZIF CITY-ST-ZIF DELFTE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 of the receiver or trystee 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.

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