

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90026 037 \*\*\*150.00

**DOCUMENT # F97000001931**

1. Entity Name  
**STRUCTURAL DESIGN GROUP, INC.**



Principal Place of Business  
**700 CENTURY PARK SOUTH  
STE 114  
BIRMINGHAM, AL 35226-3928 US**

Mailing Address  
**3629 CUMBERLAND TRACE  
BIRMINGHAM, AL 35242 US**

40013314



**DO NOT WRITE IN THIS SPACE**

01252005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**63-1178050**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**BUCKELEW, PAULA W  
1776 AMOS CIRCLE  
PENSACOLA, FL 32526**

**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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	PCD
NAME	LEE, JOHN S
STREET ADDRESS	3629 CUMBERLAND TRACE
CITY-ST-ZIP	BIRMINGHAM, AL
TITLE	<del>SB</del>
NAME	<del>LEE, DOROTHY P</del> <i>Delete</i>
STREET ADDRESS	<del>3629 CUMBERLAND TRACE</del>
CITY-ST-ZIP	<del>BIRMINGHAM, AL</del>
TITLE	TD
NAME	LEE, JOHN H
STREET ADDRESS	4860 WAR EAGLE DR
CITY-ST-ZIP	BESSEMER, AL
TITLE	VD
NAME	WINN, H C
STREET ADDRESS	700 CENTURY PARK SOUTH STE 114
CITY-ST-ZIP	BIRMINGHAM, AL 35226
TITLE	<del>VD</del> <i>v/d/s</i>
NAME	JONES, CHARLES M
STREET ADDRESS	700 CENTURY PARK SOUTH STE 114
CITY-ST-ZIP	BIRMINGHAM, AL 35226
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:** *John H. Lee* **John H. Lee, Treasurer**

**2-1-2005**

**205-426-2294**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #