


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**• Jan 17, 2006 08:00 AM  
Secretary of State**

DOCUMENT # F99000006703 1. Entity Name NORTHSTAR ENGINEERING SERVICES, INC.	
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Principal Place of Business 2431 HARTFORD HWY DOTHAN, AL 36305	Mailing Address 2431 HARTFORD HWY DOTHAN, AL 36305
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01112006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 63-1208648	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  APPLEFIELD, BRYAN 8701 N LAGOON PANAMA CITY BEACH, FL 32407
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstalling)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	00000038755U 01/19/06-80043-013 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANTORA, PHILLIP E 2431 HARTFORD HWY DOTHAN, AL 36305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROWN, LEE E 2431 HARTFORD HWY DOTHAN, AL 36305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROOKINS, LARRY W 2431 HARTFORD HWY DOTHAN, AL 36305
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Phillip E. Santora</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1-11-06 Date	234-673-9895 Daytime Phone #
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