

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G67368**
1. Corporation Name

FLORIDA ENGINEERING & CONSTRUCTION, INC.

Principal Place of Business: Highway 561, Astatula, Fl. 34705
Mailing Address: P.O. Box 94, Astatula, Fl. 34705

3. Date Incorporated or Qualified: 11/01/83
3a. Date of Last Report: 4/30/95

2. Principal Place of Business: 21 Suite, Apt. #, etc.
22 City & State: 23
24 Zip: 25 Country: 26
2a. Mailing Address: 26 P.O. Box 499
27 Suite, Apt. #, etc.
27 City & State: 28 Astatula, Fl. 34705
29 Zip: 30 Country:

4. FEI Number: 59-2537394
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Thompson, Joyce K.
Hwy 561 # 23324
Astatula, Fl. 34705

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		DELETE
TITLE	PS	<input type="checkbox"/>
NAME	Thompson, Joyce K.	
STREET ADDRESS	#23324 Hwy 561	
CITY-ST-ZIP	Astatula, Fl. 34705	
TITLE	V	<input type="checkbox"/>
NAME	Thompson, Doris C.	
STREET ADDRESS	717 Oak Lane	
CITY-ST-ZIP	Groveland, Fl. 34736	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
11 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
12 NAME			
13 STREET ADDRESS			
14 CITY-ST-ZIP			
21 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
22 NAME			
23 STREET ADDRESS			
24 CITY-ST-ZIP			
31 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
32 NAME			
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

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5-1-96
AES

SIGNATURE: *Joyce K. Thompson* Joyce K. Thompson

5/7/96

352-742-3373

CR2E034 (12/95)