## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # G68341 Secretary of State** ENGINEERS OF CENTRAL FLORIDA, INC. 02-03-2005 90031 018 \*\*\*150.00 Principal Place of Business Mailing Address 35600 HIGHWAY 27 35600 HIGHWAY 27 HAINES CITY, FL 33844-3713 US HAINES CITY, FL 33844-3713 US 3. Mailing Address P.D. Box 128 2. Principal Place of Business 29710 HIGHWAY 27 Suite, Apt. #, etc. Suite, Apt. #, etc. 01282005 CR2E034 (10/03) Chg-P City & State LAKE HAMILTON , FL City & State LAKE HAMILTON 4. FEI Number Applied For 59-2338585 Not Applicable Country \$8.75 Additional *ସି*ସ୍ଟିଷ୍ଟା-0128 5. Certificate of Status Desired 851-0128 Fee Required -6. Name and Address of Current Registered Agent -7.-Name and Address of New Registered Agent RONALD S. BURCHFIELD BURCHFIELD, RONALD S. Street Address (P.O. Box Number is Not Acceptable) 35600 HIGHWAY 27 HAINES CITY, FL 33844-3713 29710 HICHWAY 27 LAKE HAMILTON 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 -After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TTLE Addition BURCHFIELD, RONALD S. NAME NAME 29710 HILHWAY 27 STREET ADDRESS 35600 HWY 27 STREET ADDRESS CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP LAKE HAMILTON, FL 33851-0128 TITLE ☐ Delete TITI F Change ☐ Addition WILSON, RONALD H. NAME NAME 75 HAWHAIN OITPE 35600 HWY 27 STREET ADDRESS STREET ADDRESS LAKE HAMILTON, FI CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition BURCHFIELD, FAYETTE L. NAME NAME 35600 HWY 27 TE HAWHUIL OITPE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP LAKE HAMILTON, FL 33851-0128 TITLE ☐ Delete TTLE ☐ Addition Holyen, David 29710 HIGHWAY 27 HOLDEN, DAVAID NAME STREET ADDRESS 35600 HWY 27 STREET ADDRESS 33851-0128 HAINES CITY, FL 33844 CITY-ST-ZIP LAKE HAMILTON, FL CITY-ST-ZIP ☐ Delete TITI E TITI F ■ Addition BURCHFIELD, TOM NAME STREET ADDRESS 35600 HWY 27 STREET ADDRESS 29710 HILHWAY 27 HAINES CITY, FL 33844 CITY-ST-ZIP LAKE HAMILTON, FL CITY-ST-ZIP TITI F TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP---CITY-ST-ZIP 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.

ROMALD S. BURCHFIELD, CED

SIGNATURE:

FILED

Feb 03, 2005 8:00 am