FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 14 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H33451 (6)CRUMP ENGINEERING, INC. Principal Place of Business Mailing Address 4010 PRIORY CIRCLE 4010 PRIORY CIRCLE TAMPA FL 33624 TAMPA FL 33624 DO NOT WRITE IN THIS SPACE 3 Date Incorporated or Qualified 12/11/1984 2. Principal Place of Business 2a. Mailing Address Applied For 59-2480410 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 24 29 30 ☐ No g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRUMP, JACK SANDERS, JR. 4010 PRIORY CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33624** 83 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, typod or pontest name of registered agend and little if applicable (NCTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE CRUMP, JACK SANDERS, JR. 1.2 NAME **4010 PRIORY CIRCLE** STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TIFLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change 6.1 TITLE

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

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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 angular teport 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 of true dee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or organization by the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the corporation of th JACK S. CRUMP, JR.

6.2 NAME

6.3 STREET ADDRESS

813 961 5739

(10/97