FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # .112986



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90088 030 ***150.00

LAY & C	COMPANY CONSULTING EN	GINEERS					
Principal Place of Business Mailing Address					1 (CO)310 (\$75) 1100 B 305 U 1010 1010 1010 010 010 010	II UIBIE DIBEI UIGI	i filiti dinit indi
801 S. OCEAN DRIVE. #1110 801 S. OCEAN DRIVE. #1110							
FT. PIERCE FL 34949 FT. PIERCE FL 34949					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	- AOL	· ·
					05/06/1986		-
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	- F	Applied For
21	26				59-2575831		lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75	Additional	
22		27		5. Certificate of Status Desired	Fee F	Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution Added to Fees			
Zip Country		Zip Country		ry	8. This corporation owes the current year	Intangible	□No
24	25	29 30	<u>) </u>		Personal Property Tax. 10. Name and Address of New Register		LIND
	9. Name and Address of Current	Registered Agent	8	1 Name	IV. Name and Address of New Register	JU Agent	
WHI	TE, CHARLES R. L.		L				
725 N A1A E-102			8	2 Street Ad	idress (P.O. Box Number is Not Acceptable)		
JUPITER FL 33477			8	3			
			_				
		•	8	4 City	F	EL 85 Zip	Code
office or i	egistered agent, or both, in the State of m familiar with, and accept the obligations of printed name of registered agent	of Florida. Such change was autrons of, Section 607.0505, Florid	gistered Ag	es.	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as i	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PSC	☐ DELETE	1,1 TITLE	1.		Change	3 Addition
NAME	LAY, JOHN W.,JR.		1.2 NAME	1	•		ļ
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP	FT. PIERCE FL	☐ DELETE	1.4 CITY-			Change	Addition
TITLE			2.1 IIILE				
NAME			•	ET ADDRESS			
STREET ADDRESS				-ST-ZIP			
CITY-ST-ZIP TITLE	·-··	□ DELETE	3.1 TITLE			Change	e - 🔲 Addition
NAME		_	3.2 NAME				
STREET ADDRESS			3.3 STRE	ET ADDRESS			ì
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	e
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP		· **** · · · ·	4.4 CITY-	-ST-ZIP			
TITLE		DELETE	5.1 TITLE	I .		Change	e [] Addition
NAME	•		5.2 NAME				\
STREET ADDRESS	·		ŀ	EET ADDRESS			1
CITY-ST-ZIP	-21-21P		5.4 CITY 6.1 TITLE			☐ Change	e
TITLE	•	☐ DELETE	6.2 NAME			⊢ creuge	
NAME				EET ADDRESS]
STREET ADDRESS	1				•		1

CITY-ST-ZIP ** 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: