FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
SUNDA B. MORTON
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J22574** **(4)**

1. Corporate Name

PITMAN-HARTENSTEIN & ASSOCIATES, INC., ENGINEERS

Principal Place of Business:
7820 ARLINGTON EXPRESSWAY
SUITE 640
JACKSONVILLE FL 32211

Mailing Address:
7820 ARLINGTON EXPRESSWAY
SUITE 640
JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/07/1986**
3a. Date of Last Report: **03/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
City — 24 County — 25 City — 29 County — 30

4. FEI Number: **59-2695553** — 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. The corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HARTENSTEIN, ALAN
101 CENTURY 21 DRIVE #207
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 7820 Arlington Expressway, Ste 640
83
84 City: **FL** 85 Zip Code: 32211

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida and is informed that the corporation is obligated to file corporate legal documents. Having accepted the appointment as registered agent, I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

DP
PITMAN, E. H., JR.
4911 RIVER POINT RD
JACKSONVILLE FL

TVS
HARTENSTEIN, ALAN
3758 CRICKET COVE RD E
JACKSONVILLE FL

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS — ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is substantially identical to that required to be reported pursuant to Section 607.0505, Florida Statutes. I further certify that the information indicated on this report or supplemental annual report is true and complete and that my signature shall have the same legal effect and made under oath. That I am an officer or director of the corporation or the registered agent of the corporation. Having signed this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on a supplemental sheet, as an officer or director.

SIGNATURE: [signature] 5-4-95 904-724-3546

SIGNATURE AND TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0017707 CP