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

**PROFIT** CORPORATION ANNUAL REPORT

Contract of

4



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANNUAL REPORT 1998			Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
	MENT #	J22574	(4)							
PITMAN-HARTENSTEIN & ASSOCIATES, INC., ENGINEERS										
Principal Place	e of Business		Mailing Address				[	<b>              </b>	AN 81411 84741 8181	
4005 FOWLER AVENUE			4005 FOWLER AVENUE							
TAMPA FL 33	617		TAMPA FL 33617				DO NOT W	RITE IN THE	S SPACE	
							ate Incorporated or Qualifi	ed		
	lace of Business		2a. Mailing Address				<b>7/07/1986</b> El Number		Ar	oplied For
	ARLINGTON E	XPRESSWAY	26				59-2695553			ot Applicable
Suite, Apt. #, etc. 22 SUITE #640			Suite, Apt. #, etc.			<b>5</b> . Ce	ertificate of Status Desired	X	\$8.75 / Fee Re	
City & State			City & State			8. Ek	ection Campaign Financin	g	\$5.00	May Be
Zip Country			Zip Country				ust Fund Contribution			to Fees
32211	25	USA	<b>├</b> ── '	30			nis corporation owes or ha ersonal Property Tax due J	•		angible No
	9. Name and A	ddress of Current I					ame and Address of New		d Agent	
	RTENSTEIN, ALAN			81	Name					
7820 ARLINGTON EPWY					Street A	Address (P.O.	Box Number is Not Acce	ptable)		
	ITE 640 XK <b>\$O</b> NVILLE FL 3	2211		83			<u></u>			
UNIC	MOOITHIELE I'E O	EL 11		84	City				. 85 Zip (	Code
								F	L 1 ' '	
11. Pursuant 1	to the provisions of a egistered agent, or	Sections 607.0502 a both, in the State of	and 607.1508, Florida Statute Florida. Such change was a ons of, Section 607.0505, Flo	es, the above authorized by	the corp	corporation si oration's boa	ubmits this statement for t rd of directors. I hereby a	ne purpose acept the at	of changing it opointment as	s registered registered
SIGNATURE	in lamar wan, and	accept the obligant	ons of, Section 607.0303, Fig	rioa Statutes	).					
	Signature, typed or printed				nt signature (	required when rein	<del></del>	DATE	ID DIDECTOR	
12.	DP	OFFICERS AND I	DELETE	13.		ADI	DITIONS/CHANGES TO O	-FICERS AT	Change	Addition
NAME	PITMAN, E. H.,	JR.		1.2 NAME	ľ					
STREET ADDRESS	4911 RIVER PO	DINT RD		1.3 STREET	address					
CITY-ST-ZIP	JACKSONVILLE	FL	☐ DELETE	1.4 CITY - S	T - ZIP	32207			Change	X Addition
TITLE NAME	TVS Hartenstein,	AI AN	☐ octete	2.1 TITLE 2.2 NAME	ŀ				L Change	PT HORITON 1
STREET ADDRESS	3758 CRICKET			2.3 STREET	ADDRESS					ľ
CITY-ST-ZIP	JACKSONVILLE			2. 4 CITY- S	ST-ZIP	32224				
TITLE			DELETE	3.1 TITLE					☐ Change	Addition
NAME .				3.2 NAME	ADDRESS					
STREET ADDRESS CITY-ST-ZIP				3.3 STREET 3.4. CITY - S						
TITLE			☐ DELETE	4.1 TITLE	.,				Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET						
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - ST 5.1 TITLE	T - ZIP				Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY-ST	T-ZIP		<u> </u>			
TITLE			DELETE	6.1 TITLE	ł				L Change	Addition
NAME STREET ADDRESS				6.2 NAME 6.3 STREET	ADORESS					
CITY-ST-ZIP		/ )		6.4 CITY - ST	I - 7IP					
14. Thereby c	ertify that the inform	ation upplied with	this filing/does not qualify fo	r the exempt	ion stated	d in Section 1	19.07(3)(i), Florida Statute	s I further o	certify that the	information
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 suppliency ital annual control 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 ecoiver or supplied 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 of an attachment with an address.										

Alan Hartenstein02/25/98 (904)724-3546

**FILED** 

Mar 05 1998 8:00am