

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

FILED
05 NOV -7 PM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J36478 1. Entity Name SUNBELT ENGINEERING, INC.					
Principal Place of Business 5711 RICHARD STREET, SUITE 2 JACKSONVILLE, FL 32216			Mailing Address 5711 RICHARD STREET, SUITE 2 JACKSONVILLE, FL 32216		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2733840	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRINNAN, J. ALLEN JR. 5711 RICHARD STREET, SUITE 2 JACKSONVILLE, FL 32216			7. Name and Address of New Registered Agent Name GRINNAN, J. Allan Jr. Street Address (P.O. Box Number is Not Acceptable) 5711 Richard St, Ste 2 City Jacksonville FL Zip Code 32216		
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.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRINNAN, JAMES A	NAME			
STREET ADDRESS	5711 RICHARD STREET, SUITE 2	STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE, FL 32216	CITY-ST-ZIP			
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GRINNAN, J. ALLAN JR	NAME			
STREET ADDRESS	5711 RICHARD STREET, SUITE 2	STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE, FL 32216	CITY-ST-ZIP			
TITLE	DST <input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DUNN, WAYNE A	NAME			
STREET ADDRESS	5711 RICHARD STREET, SUITE 2	STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE, FL 32216	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		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.					
SIGNATURE:		Date: 10/31/05		Daytime Phone #: 904-737-5700	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					