

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **J45288** (4)

1. Corporation Name  
**MATHERS ENGINEERING CORPORATION**



Principal Place of Business: C/O WILLIAM J. MATHERS, 1111 S. FEDERAL HWY. STE 226, STUART FL 34994-3802, US  
Mailing Address: 1111 S. FEDERAL HWY STE 226, STUART FL 34994-3802, US

3. Date Incorporated or Qualified: 12/03/1986  
3a. Date of Last Report: 06/09/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 59-2746989  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
**JAMES COSENTINO**  
1111 S. FEDERAL HWY  
STE 226  
STUART FL 34994

10. Name and Address of New Registered Agent (81-84) and 85. Zip Code: FL

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 607.0205, Florida Statutes.

SIGNATURE: *[Signature]*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MATHERS, WILLIAM J.	
STREET ADDRESS	1111 S. FEDERAL HWY STE 226	
CITY-ST-ZIP	STUART FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	COLBURN, JOHN	
STREET ADDRESS	1111 S. FEDERAL HWY, STE 226	
CITY-ST-ZIP	STUART FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MATHERS, W. STANLEY	
STREET ADDRESS	1111 SOUTH FEDERAL HIGHWAY, SUITE 226	
CITY-ST-ZIP	STUART FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ADAMS, DALE H.	
STREET ADDRESS	1111 SOUTH FEDERAL HIGHWAY, SUITE 226	
CITY-ST-ZIP	STUART FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	ADAMS, DALE H.
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]* DALE H. ADAMS 4/23/96 807-0525  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)