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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

PROFIT FLORIDA DEPAREMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (8) **DOCUMENT #** 1. Corporation Name TAYLOR ENGINEERING, INC. Mailing Address Principal Place of Business 9086 CYPRESS GREEN DRIVE 9066 CYPRESS GREEN DRIVE JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 3a. Date of Last Report 3. Date Incorporated or Qualified 02/03/1995 09/03/1987 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-2850478 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired \Box Fee Required 22 \$5.00 May Be 6. Election Campaign Financing Oity & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under si 199.032, Country Ζip Country ¥ Yes □ No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name TAYLOR, R. BRUCE, III Street Address (P.O. Box Number is Not Acceptable) 9086 CYPRESS GREEN DRIVE 83 JACKSONVILLE FL 32216 Zip Code City 84 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (145)'s Fig. gistered April Signature respond when reinstalisty? ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE TITLE Hull, Terrence J. TAYLOR, R. BRUCE, III 1.2 NAME NAME 4048 Clearwater Oaks Drive 9086 CYPRESS GREEN DRIVE 1.3 STHEET ADDRESS STREET ADDRESS JACKSONVILLE FL Jacksonville, FL 32223 1.4 CITY ST-ZIP CITY-S1-ZIP Change DELETE VP 2.13ITLE TAYLOR, JUNE C. 2.2 NAME Turgeon, Jo 7795 Pt. Vicente Ct. NAME 8343 HOLLYRIDGE ROAD 2.3 STREET ADDRESS STREET ADDRESS Jacksonville, FL 32256 JACKSONVILLE FL 2.4 CITY - ST- ZIP CITY-ST-ZIP DELF 16 3 1 11T_E 3.2 NAME 3.3 STREET ADDRESS STREET ACORESS 3.4 C-TY - \$1 - ZIP CITY-ST-ZIP ☐ Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADOPESS STREET ADDRESS 4.4 CITY ST-ZIP CITY - ST - ZIP Addition [] DELETE 5 1 TILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition ☐ Change DELETE 6 1 10115 TITLE 6.2 NAME NAME 6 3 SUBCEL ADDRESS STREET ADDRESS 14. If do hereby certify that the information suppred 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 arrival report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or global of the corporation of the receiver or trusted en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13. Stanger or on all attail timent with an accress 6.4 CHTY ST-ZIP 4/12/96 904-731-7040

(12/95)

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