2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR P

DOCUMENT # J90839 01-28-2005 90016 018 ***158.75 TAYLOR ENGINEERING, INC. Mailing Address Principal Place of Business 40007878 9000 CYPRESS GREEN DRIVE 9000 CYPRESS GREEN DRIVE **STE 200 STE 200** JACKSONVILLE, FL 32256 IACKSONVILLE, FL 32256 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 Chg-P CB2E034 (10/03) City & State City & State 4. FFI Number Applied For 59-2850478 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TAYLOR, R. BRUCE, III Street Address (P.O. Box Number is Not Acceptable) 9000 CYPRESS GREEN DR **STE 200** JACKSONVILLE, FL 32256 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Change Addition TAYLOR, R. BRUCE III NAME NAME 9000 CYPRESS GREEN DRIVE STREET ADDRESS STREET ADDRESS JACKSONVILLE, FL 32256 CITY-ST-7IP CITY-ST-ZIP TIFLE Delete TITLE ☐ Change X Addition y Srinivas, Rajesh HULL, TERRENCE J. NAME HAME 9000 Cypress Green Drive 9000 CYPRESS GREEN DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32256 CITY - ST- ZIP Jacksonville, Florida 32256 X Delete TITLE ☐ Change TITLE Addition NAME TURGEON, JOT NAME Cannon, Carla 8685 HUNTERS CREEK DR S STREET ADDRESS STREET ADDRESS 9000 Cypress Green Drive Jacksonville, Florida 32256 CITY-ST-ZIP JACKSONVILLE, FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE SCHROPP, STEVEN J NAME NAME 9000 CYPRESS GREEN DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZiP JACKSONVILLE, FL 32256 CITY-ST-ZIP TITI E ☐ Delete ☐ Change Addition TITLE NAME SONG, JI-ANG NAME STREET ADDRESS 9000 CYPRESS GREEN DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32256 CITY-ST-ZIP Delete TITLE TITLE ☐ Change 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 cath; 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.

MANE OF SIGNING OFFICER OR DIRECTOR

FILED

Jan 28, 2005 8:00 am Secretary of State

904-731-7040