## **2003 FOR PROFIT CORPORATION**

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)						FILED Apr 18, 2003 8:00 am Secretary of State			
	MENT # <b>J9083</b>	9	(A)						
1. Entity Nam TAYLOR	ENGINEERING, INC.	· <i>‡</i>				04-18-2003 9013	36 050 ***150	0.00	
		r with							
Principal Plac 9000 CYPRES STE 200 JACKSONVILL	DRIVE								
2. Principal F	Place of Business	3. Mailing Address				######################################	(	<b>                                    </b>	
Suite, Apt.			☐ CHECK HERE IF MAKING CHANGES						
City & Stat	e	City & State			4. FEI Number	59-2850478	<u> </u>	Applied For	
-Zip	Country	Zip	-Country		5. Certificate of	of Status Desired	\$8.75 A		
	6. Name and Address of Current I	Registered Agent	<u>'</u>		7. Name and	Address of New Regis	<del></del>		
TAYLOR,	Name		O De North	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )					
9000 CYF	Street		O. Box Number	is Not Acceptable)					
STE 200 JACKSONVILLE FL 32256									
JACKSON	City				FL Zip Co	de			
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office o	r registere	ed agent, or both	, in the State of Florida.	I am familiar with	, and accept	
SIGNATURE .									
- JOHA DIE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registered Agent signa	ture required	when reinstating)		DATE		
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State				ction Campaign Financi of Fund Contribution.		00 May Be ed to Fees	
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/C	CHANGES TO OFFICER	RS AND DIRECTO	RS IN 11	
NAME STREET ADORESS CITY-ST-ZIP	D Taylor, R. Bruce III 9000 Cypress Green Drive Jacksonville FL 32256	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Song 9000 Jack	, Ji-Ang Cypress sonville	Green Drive , FL 32256	☐ Change	XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP——	VP TAYLOR, JUNE C. 8343 HOLLYRIDGE ROAD -JACKSONVILLE-FL	X Delete	TITLE  NAME  STREET ADDRESS				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HULL, TERRENCE J. 4048 CLEARWATER OAKS DR. JACKSONVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	!			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TURGEON, JO 8685 HUNTERS CREEK DR S JACKSONVILLE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHROPP, STEVEN J 9000 CYPRESS GREEN DRIVE JACKSONVILLE FL 32256	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME		☐ Delete	TITLE NAME			<del></del>	☐ Change	☐ Addition	

12. Thereby certify that the information supplied with this filling 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 supplied entire 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 enpowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #