

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K40486

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** ROBERTS ENGINEERING INC.

**Current Principal Place of Business:**

6729 NIGHTWIND CIRCLE  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

5764 NORTH ORANGE BLOSSOM TRAIL  
# 140  
ORLANDO, FL 32810

**New Mailing Address:**

**FEI Number:** 59-2910349      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ROBERTS, LARRY A P.E.  
Address: 6729 NIGHTWIND CIRCLE  
City-St-Zip: ORLANDO, FL

Title: VTS  
Name: ROBERTS, TELIAJEAN T  
Address: 6729 NIGHTWIND CIRCLE  
City-St-Zip: ORLANDO, FL

Title: D  
Name: ROBERTS, TELIAJEAN T  
Address: 6729 NIGHTWIND CIRCLE  
City-St-Zip: ORLANDO, FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TELIAJEAN T ROBERTS

SEC

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date