FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 AM 8:38

DOCUMENT # K59777 (8)

1. Corporation Name
KHM ENGINEERING ASSOCIATES INC.

Principal Place of Business	Mailing Address
%THOMAS E. KENT 60 RIVERCLIFF LN MERRITT ISLAND FL 32952	60 RIVERCLIFF LANE 60 RIVERCLIFF LN MERRITT ISLAND FL 32952 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/20/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 %o KIMBERLY A. MANCHESTER
Suite, Apt. #, etc.
22 60 RIVERCLIFF LN
City & State
23 MERRITT ISLAND FL
Zip 24 32952 Country 25 BREVARD

2a. Mailing Address
26 60 RIVERCLIFF LANE
Suite, Apt. #, etc.
27
City & State
28 MERRITT ISLAND FL
Zip 29 32952 Country 30

4. FEI Number: 59-3137557 ← THIS SHOULD BE 7 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $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

MANCHESTER KIMBERLY A
60 RIVERCLIFF LANE
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	MANCHESTER, KIMBERLY A.	1.2 NAME	
STREET ADDRESS	60 RIVERCLIFF LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	KENT, THOMAS E.	2.2 NAME	
STREET ADDRESS	60 RIVERCLIFF LN	2.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(i), 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: KMBerly A. MANCHESTER 1-12-95 407-453-0653
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0431141 FP

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 18, 1995

KHM ENGINEERING ASSOCIATES INC.
60 RIVERCLIFF LANE
MERRITT ISLAND, FL 32952US

SUBJECT: KHM ENGINEERING ASSOCIATES INC.
Ref. Number: K59777

Please be advised, we have received your Annual Report; however, the document **has not been filed** and is being returned for the following:

The check you submitted with your annual report was unsigned.

After the corrections have been made return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Cynthia Hendrixson
Annual Report Section

Letter number: 495A00002041