

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66609

FILED  
Feb 21, 2008  
Secretary of State

Entity Name: SGF ENGINEERING CONSULTANTS, INC.

**Current Principal Place of Business:**

10239 W. SAMPLE RD  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

10239 W. SAMPLE RD  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

FEI Number: 65-0100112      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SOMMERER, DIANE K.  
3300 UNIVERSITY DR  
SUITE 225  
CORAL SPRINGS, FL 33365 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: SOMMERER, DIANE K.,  
Address: 3300 UNIVERSITY DR STE 225  
City-St-Zip: CORAL SPRINGS, FL

Title: PD ( ) Delete  
Name: FELL, MADELINE,  
Address: 10239 WEST SAMPLE RD.  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V ( ) Delete  
Name: SCHULER, ROBERT  
Address: 10239 W. SAMPLE RD  
City-St-Zip: POMPANO BEACH, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MADELINE FELL

PD

02/21/2008

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

\_\_\_\_\_  
Date