FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L08146

1. Corporation Name

Principal Place of Business

BARNHART ENGINEERING, INC.

% JONATHAN SCOTT BARNHART % JONATHAN SCOTT BARNHART P O BOX 7582 P O BOX 7582 DO NOT WRITE IN THIS SPACE DAYTONA BEACH SHORES FL 32116 DAYTONA BEACH SHORES FL 32116 3. Date Incorporated or Qualifed 08/08/1989 Applied For 2a. Mailing Address 4. FEI Number 2, Principal Place of Business Not Applicable 59-2960149 26 21 \$8.75 Additional Suite, Apt, #, etc. Suite, Apt. #, etc. m 5. Certifcate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State \Box Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Country | Zip Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BARNHART, JONATHAN SCOTT Street Address (P.O. Box Number is Not Acceptable) 82 3175 S. PENINSULA DRIVE DAYTONA BEACH FL 32118 83 84 85 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition □ DELETE 1.1 TITLE TITLE 1.2 NAME BARNHART, JONATHAN SCOTT NAME 3175 S. PENINSULA DRIVE 1.3 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME . 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 6.1 TITLE □ Change TITLE 6.2 NAME NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

14. 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90032 032 ***150.00

CR2E034