2002 UNIFORM BUSINESS REPORT (UBR)

May 27, 2002 8:00 am M92221 DOCUMENT # Secretary of State 1. Entity Name 05-27-2002 90272 026 ***150.00 KTD CONSULTING ENGINEERS, INC. Principal Place of Business Mailing Address 237 SOUTH WESTMONTE DR. 237 SOUTH WESTMONTE DR. SUITE 300 SUITE 300 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2901864 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name DODANE, MICHAEL L. Street Address (P.O. Box Number is Not Acceptable) 237 S. Westmonte Drive. 430 E. SEMORAN Westmonte Drive. Suite 300 **SUITE 202** CASSELBERRY FL 32707 Zip Code 32714 Altamonte Springs 8. 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 1 L. Dodane President (NOTE: Registered Agent signature required when reinstating) 04/09/02 SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete ☐ Change ☐ Addition DODANE, MICHAEL L. NAME **854 WILDMERE AVENUE** STREET ADDRESS STREET ADDRESS LONGWOOD FL 32750 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KLEBANOFF, GREG NAME NAME 1084 N. CR 427 STREET ADDRESS STREET ADDRESS 3827 Peace Pipe Drive CITY-ST-ZIP LONGWOOD FL CITY-ST-ZIP Orlando, FL 32829 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME TRAHAN, E. DALE NAME 1288 WYNDHAM DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP APOPKA FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GRANEY, WILLIAM JR. NAME NAME 1544 LAWNDALE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER PARK FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

FILED

MICHaelyL. Dodane, President 4/9/02 4078347900

ddress, with all other like empowered.

changed, or on an attachment with