

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005608

FILED
Apr 17, 2009
Secretary of State

Entity Name: FLORIDA ENGINEERS MANAGEMENT CORPORATION

Current Principal Place of Business:

2507 CALLAWAY RD
SUITE 200
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

2507 CALLAWAY RD
SUITE 200
TALLAHASSEE, FL 32303 US

New Mailing Address:

FEI Number: 59-3464045 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, CARRIE
2507 CALLAWAY RD
SUITE 200
TALLAHASSEE, FL 323035268 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: CHR () Delete
Name: JEFFERY, ROGER
Address: 255 S ORANGE AVE STE 1600
City-St-Zip: ORLANDO, FL 32801

Title: DIR () Delete
Name: COX, III, ERNEST
Address: 8008 SOUTH ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32809

Title: DIR () Delete
Name: ANDERSON, MELVIN W
Address: 2103 CAPE BEND AVE
City-St-Zip: TAMPA, FL 33613

Title: VC () Delete
Name: LOMBARDO, ROBERT
Address: 316 81ST ST WEST
City-St-Zip: BRADENTON, FL 34209

Title: DIRE () Delete
Name: KUHL, GARY
Address: 6620 MERLEING LOOP
City-St-Zip: FLORAL CITY, FL 34436

Title: DIRE (X) Delete
Name: HOSAY, ROBERT H
Address: 106 E COLLEGE AVE STE 900
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: HOSAY, ROBERT
Address: 106 EAST COLLEGE AVENUE, SUITE 900
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: DIR (X) Change () Addition
Name: COMBS, BERT
Address: 301 SOUTH BRONOUGH STREET, SUITE 200
City-St-Zip: TALLAHASSEE, FL 32301

Title: CHR (X) Change () Addition
Name: LOMBARDO, ROBERT
Address: 316 81ST ST WEST
City-St-Zip: BRADENTON, FL 34209

Title: VCHR (X) Change () Addition
Name: KUHL, GARY
Address: 6620 MERLEING LOOP
City-St-Zip: FLORAL CITY, FL 34436

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARRIE FLYNN

Electronic Signature of Signing Officer or Director

PRES

04/17/2009

Date