2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005
Secretary of State

DOCUMENT# P00000071962

Entity Name: ERICKSON CONSULTING ENGINEERS, INC.

Current Principal Place of Business:

4319 SW 86TH WAY
GAINESVILLE, FL 32608

New Principal Place of Business:

1819 MAIN STREET
SUITE 402
SARASOTA, FL 34236

Current Mailing Address:

4319 SW 86TH WAY
GAINESVILLE, FL 32608

New Mailing Address:

1819 MAIN STREET
SUITE 402
SARASOTA, FL 34236

FEI Number: 58-2631795 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ERICKSON, KARYN M
4319 SW 86TH WAY
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

ERICKSON, KARYN M
1819 MAIN STREET
SUITE 402
SARASOTA, FL 34236 US

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: 01/13/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ERICKSON, KARYN M
Address: 4319 SW 86TH WAY
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ERICKSON, KARYN M
Address: 1819 MAIN STREET, SUITE 402
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KARYN M. ERICKSON PRES 01/13/2005
Electronic Signature of Signing Officer or Director — Date