

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019651

Entity Name: SIGNET ENGINEERING, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

24260 PRODUCTION CIRCLE
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

24260 PRODUCTION CIR
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 59-3698614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, TIMOTHY P
8692 MANDERSTON COURT
FORT MYERS, FL 33912 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: P () Delete
Name: HAYES, TIMOTHY P
Address: 8692 MANDERSTON COURT
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: WHEELER, KEVIN L
Address: 18677 TELEGRAPH CREEK LN
City-St-Zip: ALVA, FL 33920

Title: VP () Delete
Name: UMLOR, CHARLES J
Address: 25290 DIVOT DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ST () Delete
Name: TRASK, KENNETH N
Address: 356 SHARWOOD DRIVE
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: ROBERTS, NORMAN K
Address: PO BOX 368081
City-St-Zip: BONITA SPRINGS, FL 34136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: UMLOR, CHARLES J
Address: 22917 FOREST EDGE CT
City-St-Zip: BONITA SPRINGS, FL 34135

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 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: TIMOTHY P HAYES

P

04/21/2006

Electronic Signature of Signing Officer or Director

Date