

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 07, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000082688**

1. Entity Name

SITE ENGINEERING & PLANNING, INC.



Principal Place of Business

670 NORTH ORLANDO AVENUE  
SUITE 1004B  
MAITLAND, FL 32751 US

Mailing Address

670 NORTH ORLANDO AVENUE  
SUITE 1004B  
MAITLAND, FL 32751 US



07012004 No Chg-P CR2E034 (10/03)

4. FEI Number

04-3707090

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

PLANK, MONTJE S  
670 NORTH ORLANDO AVENUE  
SUITE 1004B  
MAITLAND, FL 32751

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000163816  
07/07/04-80019-004 558.75

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	PLANK, MONTJE S
STREET ADDRESS	670 N. ORLANDO AVE, STE 1004B
CITY-ST-ZIP	MAITLAND, FL 32751

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Montje S Plank Pres*  
MONTJE S PLANK Pres

7/2/04

Date

407-599-7009

Daytime Phone #