

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002370

FILED
May 03, 2007
Secretary of State

Entity Name: CORNERSTONE STRUCTURAL ENGINEERING, INC.

Current Principal Place of Business:

216 HERADA STREET
SAINT AUGUSTINE, FL 32080 US

New Principal Place of Business:

341 PALMAS CIRCLE
SAINT AUGUSTINE, FL 32086 US

Current Mailing Address:

216 HERADA STREET
SAINT AUGUSTINE, FL 32080 US

New Mailing Address:

341 PALMAS CIRCLE
SAINT AUGUSTINE, FL 32086 US

FEI Number: 82-0579761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLIDAY, KEVIN M P.E.
216 HERADA STREET
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

HOLIDAY, KEVIN M P.E.
341 PALMAS CIRCLE
SAINT AUGUSTINE, FL 32086 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: KAROL L. HOLIDAY

05/03/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HOLIDAY, KAROL L
Address: 216 HERADA STREET
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

Title: VP () Delete
Name: HOLIDAY, KEVIN M P.E.
Address: 216 HERADA STREET
City-St-Zip: SAINT AUGUSTINE, FL 32080 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HOLIDAY, KAROL L
Address: 341 PALMAS CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32086 US

Title: VP (X) Change () Addition
Name: HOLIDAY, KEVIN M P.E.
Address: 341 PALMAS CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32086 US

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

SIGNATURE: KAROL L. HOLIDAY

VP

05/03/2007

Electronic Signature of Signing Officer or Director

Date