


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90009 015 ***558.75

| | |
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| DOCUMENT # P03000074547 |  |
| 1. Entity Name BLACK LINE ENGINEERING, P.A. | |

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|---|---|
| Principal Place of Business 46 ZENITH STREET PORT CHARLOTTE, FL 33954 | Mailing Address 46 ZENITH STREET PORT CHARLOTTE, FL 33954 |
|---|---|

24084787



| | |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip | Country |

09012004 Chg-P CR2E034 (10/03)

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|--|--|
| 4. FEI Number 20-0105915 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

| | |
|---|--|
| 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 | 7. Name and Address of New Registered Agent Name Stephen S. Lockett Street Address (P.O. Box Number is Not Acceptable) 46 Zenith Street City Port Charlotte FL Zip Code 33954 |
|---|--|

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 Stephen S. Lockett, President *Stephen S. Lockett* **09/08/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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| FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPST LOCKETT, STEPHEN S 46 ZENITH STREET PORT CHARLOTTE, FL 33954 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing does not qualify 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 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: Stephen S. Lockett, Pres. *Stephen S. Lockett* **09/08/04** **941-766-0989**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
24684787
PO 3000074547

BLACK LINE ENGINEERING, P.A.
CONSULTING CIVIL ENGINEERS
46 ZENITH STREET
PORT CHARLOTTE, FL 33954
Phone: 941-766-0989
Fax: 941-766-1191
E-mail: lockett7956@comcast.net

SUBDIVISION/SITE PLAN DESIGN
HYDRAULIC/HYDROLOGIC STUDIES
SEPTIC/SANITARY SEWER DESIGN
WATER DISTRIBUTION
GENERAL CIVIL ENGINEERING
STRUCTURAL DESIGN
TRAFFIC IMPACT STUDIES

08 September 2004

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

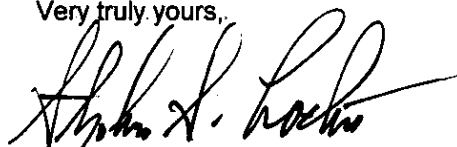
Re: Annual Report
Late Fee Waiver

Please find enclosed the Annual Report reflecting the new registered agent, and Check in the amount of \$558.75.

Please waive the late fee pursuant to FS 607.193(1)(b). I did not receive notice of the report being due by May 1, thus I am changing my registered agent to myself.

Thank you for your kind attention to this matter.

Very truly yours,


Stephen S. Lockett, P.E.