

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141279

Entity Name: CYCORP ENGINEERING, INC.

FILED  
Mar 04, 2008  
Secretary of State

## Current Principal Place of Business:

2820 MARQUESAS COURT  
WINDERMERE, FL 34786 US

## New Principal Place of Business:

317 HAZELNUT STREET  
WINTER SPRINGS, FL 32708 US

## Current Mailing Address:

2820 MARQUESAS COURT  
WINDERMERE, FL 34786 US

## New Mailing Address:

317 HAZELNUT STREET  
WINTER SPRINGS, FL 32708 US

FEI Number: 20-0461381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FISCHER, KIM H  
2820 MARQUESAS COURT  
WINDERMERE, FL 34786 US

## Name and Address of New Registered Agent:

FISCHER, KIM H  
317 HAZELNUT STREET  
WINTER SPRINGS, FL 32708 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: KIM FISCHER

03/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FISCHER, KIMBERLEY H  
Address: 2820 MARQUESAS COURT  
City-St-Zip: WINDERMERE, FL 34786 US

Title: VP ( ) Delete  
Name: FISCHER, THOMAS J  
Address: 2820 MARQUESAS COURT  
City-St-Zip: WINDERMERE, FL 34786 US

Title: VP (X) Delete  
Name: COLLINS, KEVIN T  
Address: 1445 CREEKSIDE CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 34786 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FISCHER, KIMBERLEY H  
Address: 317 HAZELNUT STREET  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP (X) Change ( ) Addition  
Name: COLLINS, KEVIN T  
Address: 1445 CREEKSIDE CIRCLE  
City-St-Zip: WINTER SRPINGS, FL 32708 US

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

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: KIM FISCHER

P

03/04/2008

Electronic Signature of Signing Officer or Director

Date