## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 🗹

## Apr 14, 2005 8:00 am Secretary of State DOCUMENT # P04000125114 04-14-2005 90101 024 \*\*\*150.00 1 Entity Name ARK ENGINEERING, INCORPORATED Principal Place of Business Mailing Address FHUHUUUA 22 NORTH BROAD ST PO BOX 10129 BROOKSVILLE, FL 34601 US BROOKSVILLE, FL 34603 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04092005 CR2E034 (10/03) Chg-P 4. FEI Number City & State City & State Applied For 20-1474047 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BANBURY, CHRISTOPHER A Street Address (P.O. Box Number is Not Acceptable) 1331 CANDLELIGHT BLVD BROOKSVILLE, FL 34601 City Zip Code 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 Fiorida. 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. p . . . ~ □ Delete TITLE ☐ Change . ☐ Addition TITLE BANBURY, CHRISTOPHER A NAME NAME PO BOX 12347 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BROOKSVILLE, FL 34603 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition DILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change . Delete -TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. Aristopher Banbury

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

FILED