

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

3/1/2

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-01-2006 90023 018 ***150.00

DOCUMENT # P04000153283

1. Entity Name
LHA ENGINEERING ASSOCIATES, INC.



Principal Place of Business
**1279 KINGSLEY AVENUE
SUITE 107
ORANGE PARK, FL 32073**

Mailing Address
**669 KINGSLEY AVENUE
ORANGE PARK, FL 32073**

66006167



DO NOT WRITE IN THIS SPACE

02202006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1887860

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BOSSINGER, LINDA
669 KINGSLEY AVENUE
ORANGE PARK, FL 32073**

**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 \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/P
AGEE, MICHELE M
783 CREIGHTON ROAD
ORANGE PARK, FL 32073**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HADDEN, KEITH I
1796 WATERBURY LANE
ORANGE PARK, FL 32073**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LAND, WILLIAM S
943 WHIPPOORWILL LANE
ORANGE PARK, FL 32073**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemptions contained 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 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

3/17/06
Date

904-269-9999
Daytime Phone #



ATTACHMENT
66006169

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2006

LHA ENGINEERING ASSOCIATES, INC.
669 KINGSLEY AVENUE
ORANGE PARK, FL 32073

Subject: LHA ENGINEERING ASSOCIATES, INC.

Reference Number:

P04000153283

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH
ANNUAL REPORTS SECTION

*Signed copy
attached.*