2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014890

FILED Jul 10, 2007 Secretary of State

Entity Name: OSBORNE ENGINEERING CONSULTANCY, INC. **Current Principal Place of Business: New Principal Place of Business:** 611 MERRIMAC ST. SE PALM BAY, FL 32909 **Current Mailing Address: New Mailing Address:** 611 MERRIMAC ST. SE PALM BAY, FL 32909 FEI Number: 06-1739722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAHAM, CALVITA GRAHAM, CALVITA 7610 EMÉRALD DRIVE 841 SEVEN GABLES CIRCLE SE US PALM BAY, FL 32909 WEST MELBOURNE, FL 32904 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: 07/10/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition OSBORNE, ROANNE Name: Name: 13 FOX RIDGE CRESCENT Address: Address: City-St-Zip: WARWICK, RI 02886 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: OSBORNE, ROBIN W JR. Name: OSBORNE, ROBIN W JR. 12702 ADVENTURE DR. 5566 57TH WAY Address: Address: RIVER VIEW, FL 33569 VERO BEACH, FL 32967 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition OSBORNE, PETER L Name: Name: 10022 RIVERS POINTE DR. Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: () Change () Addition OSBORNE, ROBIN W.A. SNR Name: Name: Address: 611 MERRIMAC ST SE Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: Title: VD Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBIN W. A. OSBORNE, SNR. **PRES** 07/10/2007

OSBORNE, ANNETTE

PALM BAY, FL 32909

611 MERRIMAC ST SE

Name:

Address: City-St-Zip: