

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90029 024 ***158.75

DOCUMENT # P05000068675

1. Entity Name
HT/DCR ENGINEERING, INC.



Principal Place of Business
2830 PARKWAY ST.
LAKELAND, FL 33811

Mailing Address
P.O. BOX 297
MULBERRY, FL 33860

00001327



2. Principal Place of Business - No P.O. Box #

5912-A Deckeridge Pkwy
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

01082008

Chg-P

CR2E034 (12/06)

City & State

Tampa, FL

City & State

4. FEI Number

20-2835863

Applied For

Not Applicable

Zip
33610

Country
USA

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JORDAN, RONALD E.
502 COUNTY RD. 640 EAST
MULBERRY, FL 33860

7. Name and Address of New Registered Agent

Name
Ronald E. Jordan
Street Address (P.O. Box Number is Not Acceptable)
2830 Parkway
City
Lakeland FL Zip Code
33811

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 *Ronald E. Jordan, Secretary* Ronald E. Jordan
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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
ROSSMAN, DALE
6977 HAYTER DR
LAKELAND, FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
VINCENT, MORRIS
2511 BACKHORN RUN DR
VALRICO, FL 33594 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
JORDAN, RONALD E
1572 CROOKED STICK DR
VALRICO, FL 33594 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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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: *Ronald E. Jordan, Secretary* Ronald E. Jordan 863-904-1077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #