

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90033 047 ***150.00

DOCUMENT # P05000155983					
1. Entity Name TREASURE COAST BUILDING ENGINEERS, INC.					
Principal Place of Business 7205 ELYSE CIRCLE PORT ST. LUCIE, FL 34952 US			Mailing Address 7205 ELYSE CIRCLE PORT ST. LUCIE, FL 34952 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 51-0560616	
Zip		Country		Zip	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOEHNEN, HARVEY E 7205 ELYSE CIRCLE PORT ST. LUCIE, FL 34952			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 Florida. I am familiar with, and accept the obligations of registered agent					
SIGNATURE _____ (NOTE: Registered Agent signature required when remaining) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PRES KOEHNEN, HARVEY E 7205 ELYSE CIRCLE PORT ST. LUCIE, FL 34952		☐ Delete		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		☐ Change ☐ Addition		
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: <i>Harvey E. Koehnen</i>			3/14/07 772 466 5509		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone, #		