FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 MAR -1 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P15856 (8)

1. Corporation Name
ENGINEERING & EQUIPMENT COMPANY

Principal Place of Business	Mailing Address
908 N. WASHINGTON STREET ALBANY GA 31701	908 N. WASHINGTON STREET ALBANY GA 31701

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/04/1987
3a. Date of Last Report: 01/26/1994

2. Principal Place of Business (21): Street, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Street, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

4. FEI Number: 58-0538626 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NEWMAN, JOHN
2001 ARTHUR AVENUE
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: VP JOHN E. NEWMAN
(NOTE: Registered Agent signature is required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	KNIGHT, III C	12 NAME	
STREET ADDRESS	2305 WINCHESTER DR.	13 STREET ADDRESS	
CITY-ST-ZIP	ALBANY GA	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	NEWMAN, JOHN	22 NAME	
STREET ADDRESS	2001 ARTHUR AVE.	23 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	KNIGHT, JOHN	32 NAME	
STREET ADDRESS	412 FOREST GLEN	33 STREET ADDRESS	
CITY-ST-ZIP	ALBANY GA	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	KNIGHT, SANFORD	42 NAME	
STREET ADDRESS	507 EDGEWOOD DR.	43 STREET ADDRESS	
CITY-ST-ZIP	ALBANY GA	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	KING, LOU	52 NAME	
STREET ADDRESS	106 BUNKERS COVE ROAD	53 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL	54 CITY-ST-ZIP	
TITLE	SD	61 TITLE	☐ Change ☐ Addition
NAME	LONG, ROSEMARY	62 NAME	
STREET ADDRESS	3717 SHORELINE	63 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: VP/D 2/27/95 904/769-7691
SIGNATURE AND TITLE OR TYPED OR PRINTED NAME OF INDIVIDUAL (Telephone Number)

0478500 FP