**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED May 12, 1999 8:00 am Secretary of State

05-12-1999 90010 047 \*\*\*150.00

DOCUMENT	#	<b>P32000</b>
DOCUMENT	11.	<b>F32U33</b>

1. Corporation Name

MECHANICAL PROFESSIONAL SERVICES, INC.

Principal Place	of Business	Mailing Address			1,00,000	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	#1#11 #7411 #1#11 41	
5850 T.G. LEE E	BLVD.	ATTN: TAX DEPARTMENT						
ITE. 120 4 NORTHSHORE CENTER		DO NOT WRITE IN THIS SPACE						
ORLANDO FL 3	ORLANDO FL 32822 PITTSBURGH PA 15212 US			3. Date Incorporated or Qualifed				
		80			12/07/1990			1
2 Principal Di	ace of Business	2a. Mailing Address			4. FEI Number		App	olied For
<b>-,</b> '	ace of Dusiness		188		25-1644666		Not	Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.	, ,,			- D	\$8.75 A	dditional
22	.,	27 EB 4651			5. Certifcate of Status	s Desired	Fee Red	quired
City & State	9	City & State			6. Election Campaign	Financing	\$5.00	May Be
23		28 HOUSTON, 7	<u> X</u> _		Trust Fund Contrib	ution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation of	wes the current year In		
24	25	29 77251-1188 30	45	<u> 4</u>	Personal Property			□No
	9. Name and Address of Current	t Registered Agent			10. Name and Addre	ss of New Registered	I Agent	
07.0	CODODATION OVETTN		81	Name				İ
	ORPORATION SYSTEM		82	Street	Address (P.O. Box Number is	Not Acceptable)		
	S. PINE ISLAND ROAD		-					
PLAN	ITATION FL 33324		83					)
			84	City	<del></del>		85 Zip C	ode
				Ĺ		Fl	_	
office or re agent. I a	to the provisions of Sections 607.0502 agistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autho	onzed by	tne como	oration's board of directors. I h	тегеру ассерт те аррс	ointment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Reg	gistered Agen	t signature r	required when reinstating)	DATE		
12. See	OHached, OFFICERS AN		13.		ADDITIONS/CHAN	GES TO OFFICERS A		RS IN 12
TITLE	PĎ	☐ DELETE	11TITLE				Change	☐ Addition
NAME	BRENTZEL, DAVID B.		1.2 NAME					
STREET ADDRESS	5850 T.G. LEE BLVD. #120		1.3 STREET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL	——————————————————————————————————————	1.4 CITY-S	r-ZIP			F1 Change	Addition
TITLE	V	☐ DELETE	2.1 TITLE				Change	Addition (
NAME	GREGORY, THOMAS M.		2.2 NAME					
STREET ADDRESS	5850 T.G. LEE BLVD. #120		2.3 STREET	ADDRESS				1
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY-S	T-ZIP			☐ Change	Addition
TITLE	V	☐ DELETE	3.1 TITLE		}		[_] Change	
NAME	ADAMS, JAMES R.		3.2 NAME					
STREET ADDRESS	5850 T.G. LEE BLVD. #120		3.3 STREE					1
CITY-ST-ZIP	ORLANDO FL		3.4. CITY- S	T-ZIP			Change	Addition
TITLE	8	☐ DELETE	4.1 TITLE				[] Citalige	C] Addition
NAME	KEYSER, MARTIN A.		4. 2 NAME					ľ
STREET ADDRESS	4 NORTHSHORE CENTER			r ADDRESS				j
CITY-ST-ZIP	PITTSBURGH PA		4.4 CITY-S	T-ZIP	**************************************		[ ] Change	<b>☑</b> Addition
TITLE	T	<b>⅓</b> DELETE	51 TITLE		William R. E	ichner	☐ Cliange	NATI MUDICION
NAME	MIELE, ROBERT C.		5.2 NAME		William N. C	1 1-		}
STREET ADDRESS	4 NORTHSHORE CENTER			ADDRESS	4 NorthShore Pittsburgh	center		
CITY-ST-ZIP	PITTSBURGH PA		5.4 CITY-S	I-ZIP	rittsburgh 1	TT 15212	☐ Change	☐ Addition
TITLE	0	☐ DELETE	6.1 TITLE				Christings	
NAME	WURZEL, STEPHEN B.		6.2 NAME					
	A MODITHOUODE CENTED		■ 0.3 STREE	TADDRESS	i			

14. I hereby certify that the information supplied with this filing 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 officer or trustee employeed 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 errap attackment with an address, with all other life ampowered. PITTSBURGH PA

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)

5468041-40010 41 P32099

## Mechanical Professional Services, Inc. Listing of Additional Directors

Charles L. Boyd 24535 Hallwood Court Farmington Hills, MI

Joseph F. Doody 375 Highland Ave. Jenkintown, PA

James V. Derrick 1400 Smith St. Houston, TX 77002 The state of the s