

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jun 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #
 1. Corporation Name **Geotechnical Professional Associates, Inc.**

Principal Place of Business Mailing Address
6816 Hanging Moss Road
Orlando, FL 32807

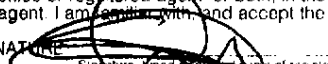
2. Principal Place of Business 21 6816 Hanging Moss Rd Suite, Apt. #, etc. RA 22 City & State Orlando, FL Zip 32807 Country Orange	2a. Mailing Address 26 6816 Hanging Moss Rd Suite, Apt. #, etc. RA 27 City & State Orlando, FL Zip 32807 Country Orange
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3. Date Incorporated or Qualified 2/1/93	3a. Date of Last Report 6/14/96
4. FEI Number 59-3161172	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
Wells, Maxwell W. Jr.
340 North Orange Ave
Orlando, FL 32801

10. Name and Address of New Registered Agent
81 Name Shelley B. Giscler
82 Street Address (P.O. Box Numbers Not Acceptable) 6816 Hanging Moss Rd
83
84 City Orlando FL 85 Zip Code 32807

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  DATE **5/29/97**

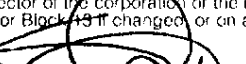
12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT Giscler, Shelley B. 710 Gentry Ct. Winter Springs, FL 32788	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3 GISCLEAR Mark D. 710 Gentry Ct Winter Springs FL 32708	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1?

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	☐ Change ☐ Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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 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:  **Shelley B. Giscler** (407) 581-6716 54

CR2E034 (9/96)