

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000021609 (1)

1. Corporation Name

HURRICANE ENGINEERING CORPORATION



Principal Place of Business

1111 S. FEDERAL HWY.
#226
STUART FL 34994

Mailing Address

1111 S. FEDERAL HWY.
#226
STUART FL 34994

3. Date Incorporated or Qualified

03/18/1993

3a. Date of Last Report

08/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3173416

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

10. Name and Address of New Registered Agent

HERRICK, ROBERT
1111 S. FEDERAL HIGHWAY
SUITE 226
STUART FL 34994

81

Name

JAMES COSENTINO

82

Street Address (P.O. Box Number is Not Acceptable)

1111 S FEDERAL HIGHWAY STE 226

83

84

City

STUART

FL

85 Zip Code

34994

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

James Cosentino
Signature typed or printed name of registered agent and title if applicable

JAMES COSENTINO

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME MATHERS, WILLIAM J
STREET ADDRESS 1111 S. FEDERAL HWY. SUITE 226
CITY-ST-ZIP STUART FL 34994

TITLE ☒ DELETE
NAME HERRICK, RITA P
STREET ADDRESS 3540 EAKVILLE RD.
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE ☒ DELETE
NAME ADAMS, DALE
STREET ADDRESS 1111 S. FEDERAL HWY., SUITE 226
CITY-ST-ZIP STUART FL 34994

TITLE ☐ DELETE
NAME COSENTINO, JAMES
STREET ADDRESS 1111 S. FEDERAL HWY., SUITE 226
CITY-ST-ZIP STUART FL 34994

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(k), 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:

James Cosentino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES COSENTINO

4/23/96

407 287-529

Date Daytime Phone #

CR2E034 (12/95)