

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 26 PM 3:14

DOCUMENT # P93000071701 (5)

1. Corporation Name

BUTLER MECHANICAL CONSULTING, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
3917 SUNNY GEM RD LAKE WALES FL 33853 US		PO BOX 799 BARTOW FL 33830 US	
2. Principal Place of Business		2a. Mailing Address	
21 2110 N.W. 17TH STREET		26 2110 N.W. 17TH STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 CRYSTAL RIVER FL		28 CRYSTAL RIVER FL	
Zip		Zip	
24 34428		29 34428	
Country		Country	
25 CITRUS		30 CITRUS	

3. Date Incorporated or Qualified	3a. Date of Last Report
10/08/1993	02/11/1994
4. FEI Number	Applied For
59-3208969	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐
7. 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	
BUTLER, HERMAN JR 3917 SUNNY GEM RD LAKE WALES FL 33853		81 Name BUTLER, HERMAN - JR	
		82 Street Address (P.O. Box Number is Not Acceptable) 2110 N.W. 17TH STREET	
		83	
		84 City CRYSTAL RIVER FL	
		85 Zip Code 34428	
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 <i>Herman Butler</i> HERMAN BUTLER - JR		DATE JAN - 17 - 95	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	VICE PRESIDENT
STREET ADDRESS	BUTLER, HERMAN JR	1.2 NAME	BUTLER, HERMAN JR
CITY-ST-ZIP	3917 SUNNY GEM RD LAKE WALES FL	1.3 STREET ADDRESS	2110 N.W. 17TH ST
		1.4 CITY-ST-ZIP	CRYSTAL RIVER, FL 34428
TITLE	NAME	2.1 TITLE	PRESIDENT
STREET ADDRESS	BUTLER, MARGUERITE D	2.2 NAME	BUTLER, MARGUERITE D.
CITY-ST-ZIP	3917 SUNNY GEM RD LAKE WALES FL	2.3 STREET ADDRESS	2110 N.W. 17TH ST
		2.4 CITY-ST-ZIP	CRYSTAL RIVER, FL 34428
TITLE	NAME	3.1 TITLE	
STREET ADDRESS		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		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 110.07(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 member 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: *Herman Butler* HERMAN BUTLER JR 1-17-95 904-5632436