

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

APPROVED
AND
FILED

95 FEB 22 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sanders B. Norman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000075946 (2)**

1. Corporation Name

ADVANCED ENGINEERING AND ENVIRONMENTAL CONSULTANTS, INC.

Principal Place of Business

1236 W HWY 436
SUITE 56
ALTAMONTE SPRINGS FL 32714

Mailing Address

1236 W HWY 436
SUITE 56
ALTAMONTE SPRINGS FL 32714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3248674

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 1423 W. FAIRBANKS

2a. Mailing Address

26 1423 W. FAIRBANKS

Suite, Apt. #, etc

Suite, Apt. #, etc

22 SUITE 215

27 SUITE 215

City & State

City & State

23 WINTER PARK, FLA

28 WINTER PARK, FLA

Zip

Country

Zip

Country

24 32789

25 USA

29 32789

30 USA

9. Name and Address of Current Registered Agent

MATHEWS, MATT
418 E VIRGINIA ST
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name MICHAEL WRIGHT
82 Street Address (P.O. Box Number is Not Applicable)
1423 W. FAIRBANKS, #215
83
84 City WINTER PARK FL 85 Zip Code 32789

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this 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 MICHAEL WRIGHT, Pres. Michael Wright 2/7/95

12. OFFICERS AND DIRECTORS

12.1 TITLE	P
12.2 NAME	WRIGHT, MICHAEL
12.3 STREET ADDRESS	1236 W. HWY 436, SUITE 56
12.4 CITY, ST, ZIP	ALTAMONTE SPRINGS FL
12.5 TITLE	V
12.6 NAME	WRIGHT, PATRICIA
12.7 STREET ADDRESS	1236 W. HWY 436, SUITE 56
12.8 CITY, ST, ZIP	ALTAMONTE SPRINGS FL
12.9 TITLE	T
12.10 NAME	WRIGHT, MICHAEL
12.11 STREET ADDRESS	1236 W. HWY 436, SUITE 56
12.12 CITY, ST, ZIP	ALTAMONTE SPRINGS FL
12.13 TITLE	S
12.14 NAME	WRIGHT, PATRICIA
12.15 STREET ADDRESS	1236 W. HWY 436, SUITE 56
12.16 CITY, ST, ZIP	ALTAMONTE SPRINGS FL
12.17 TITLE	
12.18 NAME	
12.19 STREET ADDRESS	
12.20 CITY, ST, ZIP	
12.21 TITLE	
12.22 NAME	
12.23 STREET ADDRESS	
12.24 CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	P	☒ Change ☐ Addition
13.2 NAME	WRIGHT, MICHAEL	
13.3 STREET ADDRESS	1423 W. FAIRBANKS, #215	
13.4 CITY, ST, ZIP	WINTER PARK, FL 32789	
13.5 TITLE	VP	☒ Change ☐ Addition
13.6 NAME	WRIGHT, MICHAEL	
13.7 STREET ADDRESS	1423 W. FAIRBANKS, #215	
13.8 CITY, ST, ZIP	WINTER PARK, FLA 32789	
13.9 TITLE	T	☒ Change ☐ Addition
13.10 NAME	WRIGHT, MICHAEL	
13.11 STREET ADDRESS	1423 W. FAIRBANKS, #215	
13.12 CITY, ST, ZIP	WINTER PARK, FLA 32789	
13.13 TITLE	S	☒ Change ☐ Addition
13.14 NAME	WRIGHT, MICHAEL	
13.15 STREET ADDRESS	1423 W. FAIRBANKS, #215	
13.16 CITY, ST, ZIP	WINTER PARK, FLA 32789	
13.17 TITLE		☐ Change ☐ Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 CITY, ST, ZIP		
13.21 TITLE		
13.22 NAME		
13.23 STREET ADDRESS		
13.24 CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(1)(b), 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 of this report, or on an attachment with an address.

SIGNATURE: Michael Wright, Pres. 2/7/95 407 741 8765
SIGNATURE AND TYPED OR PRINTED NAME OF RECEIVING OFFICER OR DIRECTOR
MICHAEL WRIGHT, Pres.