

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

FILED  
Feb 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000034025 (4)

1. Corporation Name

EVERETT BROTHERS ENGINEERING, INC.



Principal Place of Business

Mailing Address

C/O A. GUY NEFF  
200 S ORANGE AVENUE, SUITE 3000  
ORLANDO FL 32801

C/O A. GUY NEFF  
P.O. BOX 633  
ORLANDO FL 32802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1994

4. FEI Number

59-3243282

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

2820 FORMOSA BOULEVARD

1125 John Ridge Court

Suite, Apt. #, etc.

22

City & State

23 Kissimmee, FL

Zip

24 34747

Country

25 USA

2a. Mailing Address

2820 FORMOSA BOULEVARD

1125 John Ridge Court

Suite, Apt. #, etc.

27

City & State

28 Kissimmee, FL

Zip

29 34747

Country

30 USA

g. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC  
1201 HAYS STREET  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☒ DELETE

NAME EVERETT, BRIAN  
STREET ADDRESS 1125 JOHN RIDGE COURT  
CITY-ST-ZIP KISSIMMEE FL

TITLE V ☒ DELETE

NAME EVERETT, BERNARD  
STREET ADDRESS 1125 JOHN RIDGE CT  
CITY-ST-ZIP KISSIMMEE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 PST ☒ Change ☐ Addition

12 NAME EVERETT, BRIAN  
13 STREET ADDRESS 2820 FORMOSA BOULEVARD  
14 CITY-ST-ZIP KISSIMMEE FLORIDA 34747

2.1 TITLE ☒ Change ☐ Addition

22 NAME EVERETT, BERNARD  
23 STREET ADDRESS 2820 FORMOSA BOULEVARD  
24 CITY-ST-ZIP KISSIMMEE, FLORIDA 34747

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

9000002428389  
-02/12/98--01016--015  
\*\*\*150.00

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 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

*[Signature]*

2/16/98

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CR2E034 (10/97)