

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

FILED
May 09 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 # P94000085947 (7)

1. Corporation Name

COMMONWEALTH ENGINEERING, INC.



Principal Place of Business 222 SOUTH WESTMONTE DRIVE, STE. 200 ALTAMONTE SPRINGS FL 32714-4268	Mailing Address 222 SOUTH WESTMONTE DRIVE, STE. 200 ALTAMONTE SPRINGS FL 32714-4268
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 11/21/1994	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc. 22 Suite 209	26 Suite, Apt. #, etc. 27 Suite 209	4. FEI Number 59-3348594	Applied For Not Applicable
23 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
25 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FROSCHER, JOHN D 222 SOUTH WESTMONTE DRIVE, STE. 200 ALTAMONTE SPRINGS FL 32714-4268	10. Name and Address of New Registered Agent 81 Name ERIC W. LUDWIG, ESQUIRE 82 Street Address (P.O. Box Number is Not Acceptable) 705 DOUGLAS AVE 83 84 City Altamonte Springs FL 85 Zip Code 32714
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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 Eric W. Ludwig ERIC W. LUDWIG DATE 4-29-97

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP D FROSCHER, JOHN D 222 SOUTH WESTMONTE DRIVE, SUITE 108 ALTAMONTE SPRINGS FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DP BUCKLEY, TED W 222 S. WESTMONTE RD SUITE 108 ALTAMONTE SPRINGS FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VP SWETT, ROBERT E 222 S. WESTMONTE DR SUITE 108 ALTAMONTE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> 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 in an attachment with an address.

SIGNATURE: Robert E. Swett 4/28/97 407-788-8111

CR2E034 (9/96)