

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000087294 (2)

1. Corporation Name

RYLAND ENGINEERING CORP.

Principal Place of Business

Mailing Address

3883 Tanager Place
Palm Harbor FL 34685

3883 Tanager Place
Palm Harbor FL 34685



2. Principal Place of Business

2a. Mailing Address

21 1014 Windsor Hill Way

26 1014 Windsor Hill Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 TARPON SPRINGS, FL

28 TARPON SPRINGS, FL

Zip

Country

Zip

Country

24 34689

25 USA

29 34689

30 USA

9. Name and Address of Current Registered Agent

PAUL, HARLAN L
431 E NEW YORK AVE
DELAND FL 32724

3. Date Incorporated or Qualified

11/30/1994

3a. Date of Last Report

04/18/1995

4. FEI Number

59-3317301

Applied For

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

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

James R. Heckman

(NOTE: Registered Agent signature required when reappointing)

7/29/96

12. OFFICERS AND DIRECTORS

TITLE VTS
NAME MICHAELLOS, ART
STREET ADDRESS PO BOX 484 N/A
CITY-ST-ZIP TARPON SPRINGS FL

TITLE PDC
NAME HECKMAN, JAMES
STREET ADDRESS 3883 Tanager Place
CITY-ST-ZIP PALM HARBOR FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS

64 CITY-ST-ZIP

700001923467

-08/15/96--01068--043

***225.00

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James R. Heckman
JAMES R. HECKMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/96

Date

813/444-3354

Display Phone

CR2E034 (3/96)