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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000087294 (2)

RYLAND ENGINEERING CORP.

Principal Place of Business		Mailing Address			JALSK SEASO STATA (Aret MIN) SAND
1014 WINDSOR HILL WAY		1014 WINDSOR HILL WAY			
TARPON SPRINGS FL 34689		TARPON SPRINGS FL 34689		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/30/1994	
$ n$ \sim n	ace of Business	2a. Mailing Address	11/1/	4. FEI Number	Applied For
21 / / / / Suite, Apt	10X 404	26 P. 0 DOX	464	59-3317301	Not Applicable
22		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28 TAR PON SP	RINGS FZ.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		7 _(p)	Country	8. This corporation owes or has paid the	
24 34688 25 USA 28 34688		30 USA	Personal Property Tax due June 30.	Yes No	
Name and Address of Current Registered Agent				10. Name and Address of New Register	ed Agent
PAL	JL, HARLAN L		81 Name		
431 E NEW YORK AVE			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
UEL	AND FL 32724		83		
			84 City		85 Zip Code
44 Directions	to the provisions of Sections 607.050	2 and 607 1509. Florido Cintulo	ho about paged on	Francisco de la constanta de l	L
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. Lar	n familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.		
SIGNATURE .	Signature, typed or printed name of registered age	ort and title if applicable (NOTE:	Registered Agont signature requ	uired when reinstaling) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	VTS	DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	MICHAELOS, ART		1.2 NAME		
STREET ADDRESS	PO BOX 464 N/A		1.3 STREET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FL		1.4 CITY - ST - ZIP		
TITLE	PDC	☐ DELETE	2.1 TITLE		Change Addition
NAME	HECKMAN, JAMES		2.2 NAME		
STREET ADDRESS	3883 TANAGER PLACE		2.3 STREE1 ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL		2. 4 CITY - \$1 - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		•
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
FITLE		☐ DELETE	4.1 THILE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		∐ DELET e	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		··
TITLE		☐ DELET e	6.1 TITLE		Change Addition
NAME			6.2 NAME		İ
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP

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.