

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED

96 JUN 12 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000052926 (9)

1. Corporation Name  
DCR ENGINEERING, INC. ~~A FLORIDA CORPORATION~~  
*A Florida Corporation*



Principal Place of Business: 2160 HIGHWAY 37 SOUTH MULBERRY FL 33860  
Mailing Address: P.O. BOX 1021 MULBERRY FL 33860

3. Date Incorporated or Qualified: 06/26/1995  
3a. Date of Last Report

2. Principal Place of Business (21-24)  
2a. Mailing Address (26-30)

4. FEI Number:  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

9. Name and Address of Current Registered Agent  
ROSSMAN, DALE C  
2160 HIGHWAY 37 SOUTH  
MULBERRY FL 33860

10. Name and Address of New Registered Agent (81-85)

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature typed or printed name of registered agent and title of registered agent. (NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		
TITLE	DP	<input type="checkbox"/> DELETE
NAME	ROSSMAN, DALE C	
STREET ADDRESS	2160 HIGHWAY 37 SOUTH	
CITY-ST-ZIP	MULBERRY FL 33860	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	JORDAN, RONALD E	
STREET ADDRESS	2160 HIGHWAY 37 SOUTH	
CITY-ST-ZIP	MULBERRY FL 33860	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS	6977 HAYTER DR.	
14 CITY-ST-ZIP	LAKELAND FL	
21 TITLE	VST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS	3817 SLOVILL LANE	
24 CITY-ST-ZIP	VAL RICO, FL 33594	
31 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Todd Bredbenner,	
33 STREET ADDRESS	404 EASTON DR NE	
34 CITY-ST-ZIP	LAKELAND, FLORIDA	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changes or of an attachment with an address.

SIGNATURE: *Ronald E Jordan*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96 941-425-4944  
DATE DAYTIME PHONE #

CR2E034 (12/95)