

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000064538 (8)

1. Corporation Name

TAIT ENGINEERING, INC.



Principal Place of Business

1900 CENTRE POINTE BLVD., #203  
TALLAHASSEE FL 32308

Mailing Address

1900 CENTRE POINTE BLVD., #203  
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified  
08/18/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 4073 Mahogany Run SE

26 4073 Mahogany Run SE

4. FEI Number  
59-3339467

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

City & State

City & State

23 Winter Haven, FL

28 Winter Haven, FL

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 33884

25 Polk

29 33884

30 Polk

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARVIN, CARRIE ANNE  
1900 CENTRE POINTE BLVD., #203  
TALLAHASSEE FL 32308

81 Name  
Carrie Anne Marvin

82 Street Address (P.O. Box Number is Not Acceptable)  
4073 Mahogany Run SE

83

84 City  
Winter Haven FL 85 Zip Code  
33884

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

*Carrie A. Marvin*

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

(NOTE: Registered Agent signature required when re-registering)

3/10/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE President ☐ Change ☒ Addition  
1.2 NAME Carrie A. Marvin  
1.3 STREET ADDRESS 4073 Mahogany Run SE  
1.4 CITY-ST-ZIP Winter Haven, FL 33884

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE Vice-President ☐ Change ☒ Addition  
2.2 NAME Hogar S. Tait  
2.3 STREET ADDRESS 501 Blairstone Road, #321  
2.4 CITY-ST-ZIP Tallahassee, FL 32301

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 if changed, or on an attachment with an address.

SIGNATURE:

*Carrie A. Marvin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/96 (941) 439-3602  
Date Daytime Phone #

CR2E034 (12/95)