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Feb 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000095950 (8)

1. Corporation Name
VELOCITY ENGINEERING, INC.



Principal Place of Business

3555 BLUEBERRY DR
LAKELAND FL 33801
US

Mailing Address

3555 BLUEBERRY DR
LAKELAND FL 33811-1937

3. Date Incorporated or Qualified
12/13/1995

3a. Date of Last Report
02/23/1996

2. Principal Place of Business

21 140 FISH HATCHERY RD

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

23 City & State

23 LAKELAND, FLORIDA

24 Zip

24 33801

25 Country

25 Country

27 City & State

27 City & State

29 Zip

29 Zip

30 Country

30 Country

4. FEI Number
59-3349626

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

9. Name and Address of Current Registered Agent

SMITH, GLENN E
3555 BLUEBERRY DR
LAKELAND FL 33811

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SMITH, GLENN E
STREET ADDRESS 3555 BLUEBERRY DR
CITY-ST-ZIP LAKELAND FL 33811 ☐ DELETE

TITLE D
NAME LAFORCE, DAVID C
STREET ADDRESS 4720 RON CIR
CITY-ST-ZIP LAKELAND FL 33805 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition
2.2 NAME DAVID C. LAFORCE
2.3 STREET ADDRESS 142 FISH HATCHERY ROAD
2.4 CITY-ST-ZIP LAKELAND, FLORIDA 33801

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

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

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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.

SIGNATURE: GLENN E. SMITH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/97

941-6466826

Date

Daytime Phone #

CR2E034 (9/96)