

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90099 049 ***150.00

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1. Entity Name
FLORIDA CROWN ARCHITECTS & ENGINEERS, P.A.



Principal Place of Business
3600 VINELAND RD
STE 101
ORLANDO, FL 32811

Mailing Address
3600 VINELAND RD
STE 101
ORLANDO, FL 32811

40076676



03192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3366419

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

BARKER, EARL M JR
334 EAST DUVAL STREET
JACKSONVILLE, FL 32202

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPT
NAME WEBB, DANIEL B
STREET ADDRESS 3600 VINELAND RD STE 101
CITY-ST-ZIP ORLANDO, FL 32811

TITLE DY
NAME CARVER, ROBERT A
STREET ADDRESS 3600 VINELAND RD STE 101
CITY-ST-ZIP ORLANDO, FL 32811

TITLE DS
NAME BARKER, EARL M JR
STREET ADDRESS 334 EAST DUVAL STREET
CITY-ST-ZIP JACKSONVILLE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, or any other like empowered.

SIGNATURE: _____

Earl M. Barker, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/2007 904-353-0033