FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMEN

Sandra B. Mor

Secretary of S DIVISION OF CORPORATIONS

DOCUMENT # P96000071618 (8)

CIVIL SOURCE ENGINEERING CORP.

Mailing Address

141 WEST CENTRAL AVENUE, SUITE 9

Principal Place of Business

141 WEST CENTRAL AVENUE. SUITE 9

FILED Apr 20 1998 8:00am Secretary of State



WINTER HAVEN PL 3388U			WINTER	WINTER HAVEN FL 33880				DO NOT WRITE IN THIS SPACE		
N	·.							3. Date Incorporated or Qualified 08/28/1996		
2. Principal Pia	ace of Busin	ness	2a. Maili	2a. Mailing Address				4. FEI Number Applied For		
21			26	26				59-3397621 Not Applicable		
Suite, Apt. #	t, etc.		Suite 27	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required		
City & State	& State				6. Election Campaign Financing \$5.00 May Be					
23			28	28				Trust Fund Confribution Added to Fees		
Zip		Country	Zip		Cou	ntry		8. This corporation owes or has paid the current year Intangible		
24		25	29		30			Personal Property Tax due June 30. 🍗 Yes 🔲 No		
	9. Name	and Address of Curre	nt Registered	Agent				10. Name and Address of New Registered Agent		
CAF	TER, SIDI	NEY W			1	81	Name			
	141 CENTRAL AVENUE						82 Street Address (P.O. Box Number is Not Acceptable)			
	SUITE 9						Officer Address (1.5. par Hamber 15 Hot Address)			
		EN FL 33880			Ī	83				
- 13 T	i i Éir i Mara				1	-	O:h :	85 Zip Code		
•					i	84	City	FL 85 Zip Code		
office or re agent. I ar SIGNATURE	g iste red ag n fa miliar w	ions of Sections 607.05 gent, or both, in the Stat- ith, and accept the oblig-	e of Florida. Su gations of, Sect	ch change was a ion 607.0505, Fl	authorized orida Stati	d by utes	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered a required when reinstating)		
12.			ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE .					_	1.1 TITLE		VICE PRESIDONT Change PAddition		
NAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1.2 NA	ME		MARILYN M. CARTON		
STREET ADDRESS					1351	13 STREET ADDRESS HYZ 2020 E EDGEMOOD OR				
CITY+ST-ZIP		HAVEN FL	. •		1.4 00			LAKERAND ILL 33803		
TITLE	STD	I I I I I I I I I I I I I I I I I I I		DELETE	2.1 TITLE		,	5 ET ROTAN / TROPS. Change MAddition		
NAME	SMITH, BARBARA A			2.2 NA	2.2 NAME		MARON LICARTOR			
STREET ADDRESS						2.3 STREET ADDRESS		176 CHESTAUT ST.		
CITY-ST-ZIP		, C, OO, I C				ST-2(P	WILMINGTON MA 01885			
TITLE	<u> </u>	HAVEN FL 33880		DELETE	3.1 TII		,, <u>r</u> ,,	Change Addition		
NAME				3.2 NA						
STREET ADDRESS							ADDRESS			
]					3.4. CI		1			
CITY-ST-ZIP TITLE				DELETE	4.1 TIT) 1-7 IL	Change Addition		
NAME					4. 2 N]			
STREET ADDRESS							ADDRESS			
					4.4 Ci					
CITY-ST-ZIP TITLE				DELETE	5.1 TII		1-2H	Change Addition		
				_ >====================================	5.2 NA			La visigo La ridonoli		
NAME PARES ADDRESS							4000000			
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP TITLE				DELETE	5.4 CIT		1-715	Change Addition		
				- DECEME				Consinge C Robinon		
NAME					6.2 NA		ADDRESS			
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP		a information	with this titles :	loop not excelled	6.4 CI			ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information		
indiantad.	an éhia annı	ial connet or numblemore	tal appulations	rt is true and per	Ourata and	d the	at mw cia	grature shall have the same legal effect as if made under oath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in		