## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000010210 (7)

RANDOLPH J. AYERS CONSULTING ENGINEERS, INC.

Principal Place of Business 4327 NW 29TH TERRACE

Mailing Address

4327 NW 29TH TERRACE

## FILED May 07 1998 8:00am Secretary of State



GAINESVILLE FL 32005 **GAINESVILLE FL 32005** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/30/1997 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Country Zip Ζıp Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AYERS, RANDOLPH J 4327 NW 20TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32605** City Zip Code 85 FI

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 it applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 11 TITLE TITLE PRESIDENT 1.2 NAME NAME RANDOLPH J. AYERS 4327 NW 29 TERR. STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY - ST - ZIP GAINESVILLE, PL DELETE Change Addition TITLE. 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADORESS STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE 3.2 NAME HAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF TITLE DELETE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I 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 all achiever with an address.

SIGNATURE:

30/98 (30)338-0863

CR2E034