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Jan 21, 1999 8:00am
Secretary of State

01-21-1999 90053 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000029807

1. Corporation Name

CHAMBERLAIN ENGINEERING & CONSULTING, INC.

Principal Place of Business

**160 THORNTON DRIVE
PALM BEACH GARDENS FL 33418-8087**

Mailing Address

**160 THORNTON DRIVE
PALM BEACH GARDENS FL 33418-8087**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/31/1997

4. FEI Number

65-0736914

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

27

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CHAMBERLAIN, WILLIAM JR.

160 THORNTON DRIVE

PALM BEACH GARDENS FL 33418-8087

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 ☐ DELETE

NAME **C**
CHAMBERLAIN, DELORES H

STREET ADDRESS **160 THORNTON DR**
CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

TITLE ☐ DELETE

NAME **D**
CHAMBERLAIN, WILLIAM J JR

STREET ADDRESS **160 THORNTON DR**
CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

TITLE ☐ DELETE

NAME **CHAMBERLAIN, WILLIAM J JR**

STREET ADDRESS **160 THORNTON DR**
CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME **CHAMBERLAIN, WILLIAM J JR**

STREET ADDRESS **160 THORNTON DR**
CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

W. J. Chamberlain, Jr. PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 6, 1999

Date

561-627-5429

Daytime Phone #

CR2E034 (11/98)