


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000045230	
1. Entity Name ENVIRONEERING, INC.	

Principal Place of Business 1735 EMERSON STREET SUITE #3 JACKSONVILLE, FL 32207 US	Mailing Address 109 AZALEA POINT DR. SOUTH PONTE VEDRA BEACH, FL 32082
---------------------------------------------------------------------------------------------	------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RUDOLPH, JEANETTE M
109 AZALEA POINT DR. SOUTH
PONTE VEDRA BEACH, FL 32082

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
----------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------	------------

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
-------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------	---------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT RUDOLPH, TIMOTHY W 109 AZALEA POINT DR. SOUTH PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RUDOLPH, JEANETTE M 109 AZALEA POINT DR. SOUTH PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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

000000380335
01/11/06-80009-024 158.75

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, with all other like empowered.

SIGNATURE: 	1/7/06 (904) 665-0100
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>