


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2005 8:00 am**  
**Secretary of State**

04-12-2005 90124 034 \*\*\*158.75

<b>DOCUMENT # P97000060595</b> 1. Entity Name <b>JOHN T. BATCHELDER P.E., INC.</b>					
Principal Place of Business <b>3234 CAMPBELL ST. SARASOTA FL 34231</b>				Mailing Address <b>3234 CAMPBELL ST. SARASOTA FL 34231</b>	
2. Principal Place of Business <b>1956 Bel-Air Star Pkwy</b> Suite, Apt. #, etc.		3. Mailing Address <b>1956 Bel-Air Star Pkwy</b> Suite, Apt. #, etc.			
City & State <b>Sarasota, Florida</b>		City & State <b>Sarasota, Florida</b>		4. FEI Number <b>65-0769845</b>	
Zip <b>34240</b> Country <b>U.S.A.</b>		Zip <b>34240</b> Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>BATCHELDER, JOHN T 3234 CAMPBELL ST. SARASOTA FL 34231</b>				7. Name and Address of New Registered Agent Name: <b>(same registered agent)</b> Street Address (P.O. Box Number is Not Acceptable): <b>1956 Bel-Air Star Pkwy.</b> City <b>Sarasota</b> <b>FL</b> Zip Code <b>34240</b>	
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 <b>John T. Batchelder, Vice President</b> <i>[Signature]</i> DATE <b>4/4/2005</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing <b>\$5.00 May Be</b> Trust Fund Contribution. <input type="checkbox"/> <b>Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BATCHELDER, DESIREE C 3234 CAMPBELL ST SARASOTA FL 34231	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(same) (same) 1956 Bel-Air Star Pkwy. Sarasota, FL 34240
				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BATCHELDER, JOHN T. 3234 CAMPBELL ST SARASOTA FL 34231	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(same) (same) 1956 Bel-Air Star Pkwy Sarasota, FL 34240
				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
12. 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 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: <i>[Signature]</i> <b>Desiree Batchelder - President</b> <b>4/4/05</b> <b>371-6514</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					