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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000097780**1. Corporation Name

GEORGE & ASSOCIATES, CONSULTING ENGINEERS, INC.

Principal Place	e of Business	Mailing Address			
1719 S. GADSDEN ST		1719 S. GADSDEN STREET TALLAHASSEE FL 32301			
TALLAHASSEE FL 32301				DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed	
				11/17/1997	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied	For
<b>⊢</b>	S. Gadsden St.	26 1719 S. Gad	lsden St.	59-3477859 Not App	olicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additi	
22	Service Services	27		5. Certificate of Status Desired	ed
City & State	e	City & State		6. Election Campaign Financing \$5.00 May	
23 Talla	hassee, Florida	28  Tallahassee   Zip	, Florida	Trust Fund Contribution Added to Fe	es
Zip	Country	<b>├</b> ──	7	8. This corporation owes the current year Intangible  Personal Property Tax  □ Yes □ N	. }
24 3230		29 32301 30	⊥USA	Personal Property Tax.  10. Name and Address of New Registered Agent	<del>-</del>
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent	
GEO	RGE, ROBERT D			•	
	S. GADSDEN ST.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
TALLAHASSEE FL 32301		•	83		
			84 City	FL 85 Zip Code	
11 Pursuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes.	the above-named con	poration submits this statement for the purpose of changing its regis	stered
office or re	egistered agent, or both, in the State o	f Florida. Such change was auth	onzed by the corporat	ion's board of directors. I hereby accept the appointment as registe	red
agent. I ai	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statutes.		{
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Agent signature requir	red when reinstating) DATE	
SIGNATURE 12.	Signature, typed or printed name of registered agent OFFICERS AND		gistered Agent signature requir	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	N 12 Addition
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	
12.	OFFICERS AND	DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	
12. TITLE NAME STREET ADDRESS	OFFICERS AND P GEORGE, ROBERT D 1719 S. GADSDEN ST	DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	Addition
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GEORGE, ROBERT D 1719 S. GADSDEN ST TALLAHASSEE FL 32301 T	DIRECTORS ☐ DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   Change	Addition
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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 suppliemental 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 corporatio) or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in phone (850) 521-0344

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90227 009 \*\*\*150.00