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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000098021 (3)

## FILED May 20 1998 8:00am Secretary of State

WREN ENGINEERING, P.A. Principal Place of Business Mailing Address 398 AMETHYST COURT 398 AMETHYST COURT LAKE MARY FL 32746 LAKE MARY FL 32746 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/14/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 59.3478403 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 7ip Country Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WREN, DANE C 398 AMETHYST COURT 82 Street Address (P.O. Box Number is Not Acceptable) LAKE MARY FL 32748 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.05:02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or profit in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a m familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. DANE C. WEEN, PRESIDENT SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE Change 1.1 TITU Addition TITLE WREN, DANE C 1.2 NAME NAME 72E034 **398 AMETHYST COURT** STREET ADDRESS 1.3 STREET ADDRESS LAKE MARY FL 32748 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE WREN, LAURIE L 2.2 NAME NAME 398 AMETHYST COURT STREET ADDRESS 2.3 STREET ADDRESS LAKE MARY FL 32748 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE WREN, DANA A 3.2 NAME NAME 28311 NE 148TH ST STREET ADDRESS 3.3 STREET ADORESS **DUVALL WA 98019** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE \_\_\_ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby 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 logal 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 our an additional with an address.