

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**  
 05-02-2002 90022 047 \*\*\*150.00

**DOCUMENT # P99000051834**

1. Entity Name

**MECHANICAL ENGINEERING, INC.**

Principal Place of Business

**11136 RIVERCREEK DRIVE EAST  
 JACKSONVILLE FL 32223**

Mailing Address

**11136 RIVERCREEK DRIVE EAST  
 JACKSONVILLE FL 32223**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3578059**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**KRONFIELD, SHAUNY S  
 1520 BAY SHORE DRIVE  
 COCOA BEACH FL 32931**

7. Name and Address of New Registered Agent

Name **ALAN G. COOPER**

Street Address (P.O. Box Number is Not Acceptable)

**11136 RIVERCREEK DRIVE EAST**

City

**JACKSONVILLE,**

**FL**

Zip Code

**32223**

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.

SIGNATURE **ALAN G. COOPER - PRES**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**4/16/02**

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2002 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing

Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
 NAME **COOPER, ALAN G**  
 STREET ADDRESS **11136 RIVERCREEK DRIVE EAST**  
 CITY-ST-ZIP **JACKSONVILLE FL 32223**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **3** ☐ Change ☒ Addition  
 NAME **REBECCA D COOPER**  
 STREET ADDRESS **11136 RIVERCREEK DR. E**  
 CITY-ST-ZIP **JACKSONVILLE, FL 32223**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **Alan Cooper** **ALAN G. COOPER PRES** **4/16/02** **904-268-3894**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**3894**

CR2E034 (9/01)