

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 04, 2000 8:00 am**  
**Secretary of State**  
 05-04-2000 90141 022 \*\*\*150.00

**DOCUMENT # P99000058405**

1. Entity Name  
**ENGINEERING RESOURCES & RECRUITING, INC.**

Principal Place of Business      Mailing Address  
**715 SOUTH LAKESIDE TERRACE**      **POST OFFICE BOX 891**  
**EAGLE LAKE FL 33839**      **EAGLE LAKE FL 33839-0891**

2. Principal Place of Business      3. Mailing Address  
**715 South Lakeside Terr.**      **P.O. Box 891**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**Eagle Lake, FL**      **Eagle Lake, FL**  
 Zip      Zip  
**33839**      **33839-0891**  
 Country      Country  
**USA**      **USA**

4. FEI Number      Applied For  
**59-3588566**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ZEAGLER, JANE M**  
**8769 VIKING LANE**  
**LAKELAND FL 33809**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	<b>JANE M. ZEAGLER</b>	<b>8769 Viking Lane</b>	<b>Lakeland, FL 33809</b>		
	<b>President/Vice President</b>				
	<b>SECTY. TREASURER</b>	<b>715 S. Lakeside Terrare</b>	<b>Eagle Lake, FL 33839</b>		
	<b>SUSAN K. LUNSFORD</b>				

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: **Susan K. Lunsford**      **Susan K. Lunsford**      4/24/00      863-299-7662  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)