

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100487

Entity Name: HYDE ENGINEERING GROUP, INC.

FILED
Feb 11, 2006
Secretary of State

Current Principal Place of Business:

23085 DEERFLY RD
BROOKSVILLE, FL 34602

New Principal Place of Business:

Current Mailing Address:

23085 DEERFLY RD
BROOKSVILLE, FL 34602

New Mailing Address:

FEI Number: 59-3620850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JANICE H
23085 DEERFLY ROAD
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, JANICE H
Address: 23085 DEERFLY RD
City-St-Zip: BROOKSVILLE, FL 34602

Title: COB () Delete
Name: HYDE, ROBERT W
Address: 9282 SW 93RD CIRCLE
City-St-Zip: OCALA, FL 34481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: COB (X) Change () Addition
Name: HYDE, MARION L
Address: 9282 SW 93RD CIRCLE
City-St-Zip: OCALA, FL 34481

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANICE H JONES

P

02/11/2006

Electronic Signature of Signing Officer or Director

Date