

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S31217

FILED
Mar 26, 2009
Secretary of State

Entity Name: PINE DESIGN ENGINEERING SERVICES COMPANY

Current Principal Place of Business:

550 94TH AVE. NORTH
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

550 94TH AVE. NORTH
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-3055750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SABLICH, MARK
550 94TH AVE. NORTH
ST PETERSBURG, FL 33702 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: PD () Delete
Name: SABLICH, MARK
Address: 550 94TH AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: D () Delete
Name: SABLICH, DEBORAH
Address: 550 94TH AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: VP () Delete
Name: MORTON, DAVID B
Address: 550 94TH AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: T () Delete
Name: GILLEY, PAIGE
Address: 550 94TH AVE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: S () Delete
Name: LAPLANTE, HOLLYE M
Address: 550 94TH AVE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: VP () Delete
Name: BUSH, LOUIE G
Address: 550 94TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33702 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: PAIGE GILLEY

T

03/26/2009

Electronic Signature of Signing Officer or Director

Date