## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # \$34972

1. Corporation Name

AA ENGINEERING & SURVEYING, INC.

## **FILED** Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90069 003 \*\*\*150.00



					<u> </u>			H WIND HUBI
Principal Place	of Business	Mailing Address						
407 LAKE HOWELL RD. 407 LAKE HOWELL RD.								
MAITLAND FL 32751 MAITLAND FL 32751					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
•					03/01/1991			
					4. FEI Number		Anni	ed For
	ace of Business	2a. Mailing Address	70	AVE	i	$\vdash$	<del></del>	
21 <b>5</b> 70	HORATIO AVE.	26 570 HORAT	10	AVE	59-3072653	60.7		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		e Requ	ditional
22		27					•	
City & State		City & State	_,	A A . A	6. Election Campaign Financing		00 м	•
23 MAITL	.AND, <u>FLORIDA</u>			<u>ORIDA</u>	Trust Fund Contribution	Add	ded to	Fees
Zip	Country		ountry	- 1	8. This corporation owes the current year In		_	<b>.</b>
24 327	51 25 USA	29 32 75 1 30	<u> </u>	SA	Personal Property Tax.	Yes		]No
	9. Name and Address of Current	Registered Agent	┵		10. Name and Address of New Registered	Agent		
			81	Name				
Brewer, Wesley Earl II				Street Addre	ess (P.O. Box Number is Not Acceptable)			···
102 ELDERWOOD STREET				Street Addre	ess (r.o. box radinoci is recrytocopusio)			
WINT	TER SPRINGS FL 32708		83					
			L					
			84	City	FL	85	Zip Co	ode
44 5	to the musticions of Sections 607 0503	and 607 1508 Florida Statutes the	abov/	e-named como	pration submits this statement for the purpose of	f changin	a its re	gistered
) office or re	enistered agent or both in the State o	t Florida. Such change was authorizi	ea by	the corporatio	n's board of directors. I hereby accept the appo	intment a	is regis	stered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida Sta	atutes	3.				}
SIGNATURE								
	Signature, typed or printed name of registered agent			nt signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12
12.	OFFICERS AND		_		ADDITIONS/CHANGES TO OFFICERS A	☐ Cha		Addition
TITLE	Р	_	TITLE		•		gc	
NAME	Brewer, Wesley E, II	1.2	NAME	1				ł
STREET ADDRESS	102 ELDERWOOD STREET	1.3	STREE	T ADDRESS				
CITY-ST-ZIP	WINTER SPRINGS FL	1.4	CITY-S	ST-ZIP				
TITLE	VP	☐ DELETE 2.1	TTLE			Cha	nge	☐ Addition
P NAME	CAMPBELL, NEVIL A	22	NAME	1				j
STREET ADDRESS	10025 LITTLE TEAK ST	2.3	STREE	TADDRESS	•			
CITY-ST-ZIP	ORLANDO FL		CITY-	ST-ZIP	• •		•	~.
TITLE	S		TITLE			Cha	inge	Addition
1	POLINO, PHILLIPS D		NAME	1				ł
NAME				T ADDRESS				
STREET ADDRESS	258 ALTAMONTE DR							
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		CITY-	SI-ZIP		[☐ Cha	enge	Addition
TITLE	<b>.</b>		TITLE				90	Last reconstruction
NAME	•		NAME	1				
STREET ADDRESS	•	4.3	STREE	T ADDRESS				
CITY-ST-ZIP			CITY-9	ST-ZIP				
TITLE			TITLE			☐ Cha	ınge	Addition
NAME		. 5.2	NAME					ļ
STREET ADDRESS		5.3	STREE	T ADDRESS				
CITY-ST-ZIP		· 5.4	CITY- S	ST-ZIP				
TITLE	<del> </del>	DELETE 6.1	TITLE			Cha	ınge	Addition
			NAME					
STREET ADDRESS				T ADDRESS				
L STREET BUILDINGS	proper to the terminal of the			1				

per pol qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information by the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this Indicated on this annual report or supplemental appropriate or director of the corporation or the received Block 12 or Block 13 if changed, or on an attention address, with all other like empowered.

SIGNATURE:

RE REQUIRED ED NAME OF SIGNING OFFICER OR DIRECTOR