

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #: 534972

1. Entity Name
AA ENGINEERING & SURVEYING, INC.

FILED

01 SEP 24 PH 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
570 HORATIO AVE.
MAITLAND, FL 32751

Mailing Address
SAME

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2001 AMENDED UBR

4. FEI Number 593072653
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
BREWER, DEBORAH A.
102 ELDERWOOD ST.
WINTER SPRINGS, FL 32708

7. Name and Address of New Registered Agent
Name WESLEY E. BREWER II
Street Address (P.O. Box Number is Not Acceptable)
~~258 E. ALTAMONTE SPRINGS DR.~~
258 E. ALTAMONTE SPRINGS DR.
City ALTAMONTE SPRINGS FL Zip Code 32714

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  8-8-2001
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, 2001 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	PRES BREWER, DEBORAH A. 102 ELDERWOOD ST. WINTER SPRGS, FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. EBERHARDT, THOMAS P. 4315 SANDHURST DR. ORL, FL 32817	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES WALSH, KEVIN J. 2302 AMHERST ST. ORLANDO, FL 32804	<input type="checkbox"/> Delete
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	PRES. WESLEY E. BREWER II 258 E. ALTAMONTE DR. ALTAMONTE SPRINGS, FL 32714	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES. EBERHARDT, THOMAS P. 4315 SANDHURST DR. ORL, FL 32817	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. WESLEY E. BREWER II 258 E. ALTAMONTE DR. ALTAMONTE SPRINGS, FL 32714	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES. WALSH, KEVIN J. 2302 AMHERST ST. ORLANDO, FL 32804	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

3. 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:  8-8-2001 602-723-6884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (11/00)