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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$35129

1. Corporation Name

FILED Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90012 006 ***158.75

MCCREE	E ARCHITECTS AND ENGIN	EERS, INC.							
Principal Place	e of Business	Mailing Address			1 18811818 188 11(5) 8(18) 118)	14 fibio 1811 BIBIT B	1811 BIBII BIBII B	(31) 31317 (30)	
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ORLANDO FL 32803 ORLANDO FL 32803					DO NOT W	VRITE IN THIS	SDACE		
					3. Date incorporated or Qualit		SPACE		
					03/01/1991	160			
2 Defendant D	Nace of Divisions	2a. Mailing Address			4. FEI Number _		Δη	plied For #	
	lace of Business	26. Walling Address			59-3074574			t Applicable	٠,٠
21 Suite Ant	# etc	Suite, Apt. #, etc.				$\neg \bot \neg$	\$8.75		Ĭ,
Suite, Apt. #, etc.		27			5. Certifcate of Status Desired	3 X ()	Fee Re		
City & State		City & State			6. Election Campaign Financi	ng _	\$5.00	Mav Be	
23		28			Trust Fund Contribution	.,a 🗀		o Fees	
Zip	Country	Zip	Countr	y	8. This corporation owes the	current year Int	angible		
24	25	29	30		Personal Property Tax.		Yes	□No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of Ne	w Registered	Agent		
			81	Name	•				
	CREE, RICHARD T.		82	Street Add	dress (P.O. Box Number is Not Acc	eptable)			
	EAST PRINCETON STREET			J. J	, , , , , , , , , , , , , , , , , , , ,	ir tem i den		. يهدوه سي	
ORL	ANDO FL 32803		83	3	14.7		光緒時間	(金剛は)	
			84	City		<u> </u>	85 Zip (Code	
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							<u> </u>		
	to the provisions of Sections 607.050 registered agent, or both, in the State Im familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was au titions of, Section 607.0505, Flori	s, the above thorized by da Statute	/e-named con / the corporat s.	poration submits this statement for tion's board of directors. I hereby ac	the purpose of ccept the appoi	changing its ntment as re	registered gistered	
11. Pursuant office or r agent. I a SIGNATURE					poration submits this statement for tion's board of directors. I hereby ac	the purpose of ecept the appoi	changing its ntment as re	registered gistered	
	Signature, typed or printed name of registered age					DATE		RS IN 12	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE: I	Registered Age		red when reinstating)	DATE			
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14. I hereby certify that the information substitute 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, from an attachment with an address, with all other like empowered.

SIGNATURE:

TRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR