

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S40533** (9)

1. Corporation Name

ENGINEWITY INTERNATIONAL, INC.

Principal Place of Business

**12385 AUTOMOBILE BLVD
CLEARWATER FL 34622
US**

Mailing Address

**12385 AUTOMOBILE BLVD
CLEARWATER FL 34622
US**

FILED
95 JUL 31 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/26/1991

3a. Date of Last Report

06/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3093868

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for interjurisdictional tax under s. 189.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SURATT, TED L
5465 115TH AVENUE NORTH
CLEARWATER FL 34620**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

12385 AUTOMOBILE BLVD

83

84 City

CLEARWATER

FL

85 Zip Code

34622

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

SURATT, TED L

STREET ADDRESS

**12385 AUTOMOBILE BLVD
CLEARWATER FL**

CITY ST ZIP

TITLE

DS

NAME

SURATT, CAROL V

STREET ADDRESS

**12385 AUTOMOBILE BLVD
CLEARWATER FL**

CITY ST ZIP

TITLE

DT

NAME

HOLTZ, JEFF R.

STREET ADDRESS

**12385 AUTOMOBILE BLVD
CLEARWATER FL**

CITY ST ZIP

TITLE

DVP

NAME

WINN, ROGER E

STREET ADDRESS

**12385 AUTOMOBILE BLVD
CLEARWATER FL**

CITY ST ZIP

TITLE

DVP

NAME

MORAN, JAMES J

STREET ADDRESS

**12385 AUTOMOBILE BLVD
CLEARWATER FL**

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(k), 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 or 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, or on an attachment with an address.

SIGNATURE: *Carol V. Suratt* **CAROL V. SURATT SECRETARY** **7/24/95** **(813) 593-2202**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E034 (3/95)