## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# S48791

Entity Name: JMI ENGINEERS, INC.

FILED Apr 10, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1424 E. PIEDMONT DR. STE 100 TALLAHASSEE, FL 32312 US **New Mailing Address: Current Mailing Address:** 1424 E. PIEDMONT DR. STE 100 TALLAHASSEE, FL 32312 US FEI Number: 33-0337209 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: CREEL, DIANE C Name: Name: CREEL, DIANE C 250 PARK AVENUE SOUTH, 9TH FLOOR 100 W.BROADWAY SUITE 5000 Address: Address: City-St-Zip: NEW YORK, NY 10003 City-St-Zip: LONG BEACH, CA 90802

Title: VPAT () Delete Title: () Change () Addition

 Name:
 STEVENSON, SCOTT
 Name:

 Address:
 ONE TOWN CENTER ROAD
 Address:

 City-St-Zip:
 BOCA RATON, FL 33486
 City-St-Zip:

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: ALBERT, CHARLES S Name: ALBERT, CHARLES S

 Address:
 250 PARK AVENUE SOUTH
 Address:
 100 W. BROADWAY SUITE 5000

 City-St-Zip:
 NEW YORK, NY 10003
 City-St-Zip:
 LONG BEACH, CA 90802

Title: () Delete Title: (X) Change ( ) Addition RABINSON, MICHAEL A ROBINSON, MICHAEL A Name: Name: Address: ONE TOWN CENTER ROAD Address: ONE TOWN CENTER ROAD City-St-Zip: City-St-Zip: BOCA RATON, FL 33486 BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT STEVENSON VPAT 04/10/2003