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 # **S56991**

NAME

STREET ADDRESS CITY-ST-ZIP

CHURCH & COMPANY ENGINEERS, INC.

011011011		,				
Principal Place of Business Mailing Address			ailing Address			C 198(1918 194 S11/5 S11/19 ANITS 1914 ANITS 1914 ANITS 1914
3412 KORI ROAD 3412 KORI ROAD SUITE 1 SUITE 1			ITE 1			DO NOT WINTE IN THE SPACE
JACKSONVILLE FL 32257-5454 JACKSONVILLE FL 32257-5454					DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed 05/31/1991
		1.	\$4-lifes & defence			4. FEI Number Applied For
—	ace of Business	2a. Mailing Address				59-3073274 Not Applicable
21	#	Suite, Apt. #, etc.				CQ 75 Additional
Suite, Apt. i	#, etc.			- •		_5. Certificate of Status Desired Fee Required
City & State		- 21	City & State			6. Election Campaign Financing \$5.00 May Be
23	•	28	•			Trust Fund Contribution Added to Fees
Zip	Country	\dashv	Zip	Country	y	8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. Yes No
	9. Name and Address of Currer	nt Regis	tered Agent	-4.		10. Name and Address of New Registered Agent
11611	OMICC PODDEN D			81		jet Church
HALLOWES, BORDEN R.				82	Street Add	ress (P.O. Box Number is Not Acceptable)
4339 VENETIA BLVD JACKSONVILLE FL 32210			0.0	1445	33 Millstone Ct.	
JACI	ASSINVILLE PL 32210			83	"]	·
				84	1 ' Ja	deprillo FL 85 Zip Coge 32257
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 farfilliar 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)						
12.	OFFICERS AN	ID DIRE	CTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PT		☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CHURCH, JANET L		٠.	1.2 NAME		
STREET ADDRESS	4433 MILLSTONE CT			1.3 STREE	ET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE	-		2.1 TITLE	1	Change Addition	
NAME)	CHURCH, C RAYMOND			, 2.2 NAME		
STREET ADDRESS	1 ICO IMPERIORE C.			ET ADDRESS		
_CITY-ST-ZIP			2. 4 CITY- 3.1 TITLE		☐ Change ☐ Addition	
TITLE	· · ·		C DEEC'LE	3.2 NAME		_ ,
NAME					ET ADDRESS	ļ
STREET ADDRESS				3.4. CITY-		
CITY-ST-ZIP			DELETE	4.1 TTLE		☐ Change ☐ Addition
NAME			_	4. 2 NAME	<u> </u>	(
STREET ADDRESS					ET ADDRESS	,
CITY-ST-ZIP				4.4 CITY-	ST-ZIP	
TITLE			☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STRE	ET ADDRESS	
CITY-ST-ZIP				5.4 CITY-		
TITLE			☐ DELETE	6.1 TITLE		☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

14. 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 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, with all other like empowered. SIGNATURE:

FILED

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90185 002 ***150.00