## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

MCGOWAN & COMPANY ENGINEERING, INC.

**FILED** May 04 1998 8:00am Secretary of State



							()	EU 81811 (881
Principal Place of Business Mailing Address						a table diseat intel intel denie (inti fant nint et	<b>3</b> 14 <b>01011 0101</b> 1 011	BIL DIBIL 1601
20005 NW 176	STH AVE	PO BOX 2612						
OKEECHOBEE FL 34972 US		OKEECHOBEE FL 34973 US		DO NOT WRITE IN THIS SPACE				
••						3. Date Incorporated or Qualified		
	_					03/04/1992		
2. Principal Pl	ace of Business	2s. Mailing Address				4. FEI Number	A	pptied For
21		[26]				65-0324872	N	ot Applicable
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
City & State		City & State				6 Days Own C		lequired
23		28				<b>6.</b> Election Campaign Financing  Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid the c		
24	25	29	30			Personal Property Tax due June 30.		No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	J Agent	
	GOWAN, THOMAS F., III			81	Name			
	55 NORTHWEST 176TH AVENUE	•	Ī	B2	Street Addr	ess (P.O. Box Number is Not Acceptable)	<del>-</del>	
UN	EECHOBEE FL 34972		},	83	<del></del>		<del> </del>	
			['	83				
			Ī	84	City	F	<b>85</b> Zip	Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	ove-	named corp	oration submits this statement for the purpose	of changing i	its registered
office or re	egistered agent, or both, in the State of familiar with and accept the obligat	of Florida, Such change was a ions of Section 607 0505. Flo	authorized orida Statu	by:	the corporati	ion's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE								
	Signature, typed or printed name of registered agent			Agen	i signature require	ed when reinstating) DATE		
12.	PS OF LICERS AND		13.	_		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE NAME	MCGOWAN, THOMAS F., III	☐ DELETE		1.1 TITLE 1.2 NAME			☐ Change	☐ Addition
STREET ADDRESS	20055 NW 176TH AVE							
CITY-ST-ZIP	OKEECHOBEE FL		1.3 STREET ADDRESS 1.4 CHY-ST-ZIP					1
TITLE	1110		21 TITL		ZIF		Change	Addition
NAME	MCGOWAN, THOMAS F., III		2.2 NAME					
STREET ADDRESS	20055 NW 176TH AVE			2.3 STREET ADDRESS 2. 4 City - St - Zip				ŀ
CITY-ST-ZIP	OKEECHOBEE FL							
TITLE		☐ DELET <b>E</b>	3.1 TITLE				Change	☐ Addition
NAME	MCGOWAN, MARCIA B.		3.2 NAME					
STREET ADDRESS	20055 NW 176TH AVE.		3.3 STREET ADDRESS		DDRESS			
CITY-ST-ZIP			3.4. CIT	Y-ST	- ZIP			
TITLE	DELETE 4.1 TI		4.1 TITU	E			☐ Change	☐ Addition
NAME	4.21		4. 2 NAM	ME				
STREET ADDRESS			4.3 STRI	EET A	DDRESS			
CITY-ST-ZIP			4 4 City		ZIP		<del></del>	
TITLE		DELETÉ	5.1 TITLE				L Change	Addition
NAME etheet annoese			5.2 NAME		DDDCOO			
STREET ADDRESS			5.3 STRE					
CITY-ST-ZIP		DELETE	5.4 CITY 6.1 TITL		ZIP		Change	Addition
NAME		[ Decemb	6.2 NAM			•	L CHAINGE	CT Magrian
STREET ADDRESS			6.3 S1RE		DUBE 66			
CITY-ST-ZIP			6.4 CITY					
	ortify that the information supplied with	this filing doos not qualify to				Section 119 07/3Vi) Florida Statidas I further o	matification atom	:m/:

Indicated on this annual report or supplicit with this limit does not quality for the exemption stated in Section 19.07(3)(1). Florida Statutes, inclinates in further certify that the informatio indicated on this annual report or supplicit with a minutal 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.

1-21.00