

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 24 AM 7:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V33714** (9)
1. Corporation Name
HIGH TECHNOLOGY ENGINEERING SERVICES, INC.

Principal Place of Business Mailing Address
PO BOX 28084 PANAMA CITY BEACH FL 32411 **PO BOX 28084 PANAMA CITY BEACH FL 32411**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/05/1992** 3a. Date of Last Report **02/02/1994**

4. FEI Number **59-3121594** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

9. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RILEY, FLORENCE
1307 POMPAÑO RD.
PANAMA CITY BEACH FL 32411**

81 Name **Florence N. Gamble**
82 Street Address (P.O. Box Number is Not Acceptable) **1307 Pompano Rd**
83 **Panama City Beach, FL**
84 City **FL** 85 Zip Code **32408**

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

Florence N. Gamble, President

4/10/95

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VP**
NAME **GAMBLE, MICHAEL T**
STREET ADDRESS **1307 POMPAÑO RD**
CITY - ST - ZIP **PANAMA CITY BCH FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **P**
NAME **RILEY, FLORENCE**
STREET ADDRESS **1307 POMPAÑO RD**
CITY - ST - ZIP **PANAMA CITY FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **Florence N. Gamble**
2.3 STREET ADDRESS **1307 Pompano Rd**
2.4 CITY - ST - ZIP **Panama City, FL 32408**

TITLE **ST**
NAME **POWELL, MARIE**
STREET ADDRESS **1307 POMPAÑO RD.**
CITY - ST - ZIP **PANAMA CITY FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **marie Perullo**
3.3 STREET ADDRESS **105 Legend Lakes Dr**
3.4 CITY - ST - ZIP **Panama City, FL 32408**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(3)(h), 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:

Florence N. Gamble

3/28/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florence Gamble