

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

52 MAY -1 PM 11:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **V46358** (0)

1. Corporation Name  
**AMERICAN ENGINEERING CONSULTANTS, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **790 HARBOUR DR NAPLES FL 33940**  
Mailing Address: **790 HARBOUR DR NAPLES FL 33940**

3. Date Incorporated or Qualified: **06/22/1992**      3a. Date of Last Report: **05/01/1994**  
4. FEI Number: **65-0343498**      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**  
6. This corporation has liability for intangible taxes under S. 197.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **21**      2a. Mailing Address: **26**  
State Apt. # etc.: **22**      State Apt. # etc.: **27**  
City & State: **23**      City & State: **28**  
Zip: **24**      Country: **25**      Zip: **29**      Country: **30**

9. Name and Address of Current Registered Agent  
**VOLPE, MICHAEL J.  
801 ANCHOR RODE DR  
SUITE 203  
NAPLES FL 33940**

10. Name and Address of New Registered Agent  
81 Name: \_\_\_\_\_  
82 Street Address (P.O. Box Number is Not Acceptable): **THE NORTHERN TRUST BUILDING**  
83 **4001 TAMiami TRail N., SUITE 330**  
84 City: **NAPLES**      85 FL 33940

11. Pursuant to the provisions of Sections 609.01, 609.02 and 609.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address set forth herein 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 Sections 609.01, 609.02, Florida Statutes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	<b>HURT, RONALD L. 537 BAY VILLAS LN NAPLES FL</b>	12. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		13. STREET ADDRESS	
CITY		14. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STATE		15. STATE	
ZIP		16. ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
17. NAME		18. NAME	
19. STREET ADDRESS		20. STREET ADDRESS	
21. CITY		22. CITY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23. STATE		24. STATE	
25. ZIP		26. ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am qualified for the corporation stated in the form (19.037, 609) 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 in person by the officer or director of this corporation at the time of filing this report as required by Chapter 609, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report as the officer or director of this corporation.

SIGNATURE: *Ronald L. Hurt*      4/27/95      813-619-1531  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR