FILE NOW: FILING FEE AFTER MAY 1 10 2000.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mostkam Secretary of State DIVISION OF CORPORATI

FILED

98 FEB -5 AH 11:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

V56184

LYNCH ENGINEERING CONSULTANTS, INC.

Principal Place of Business

Mailing Address

(7)

1321 MERLYN ST LAKELAND FL 33813		1321 MERLYN ST LAKELAND FL 33813-4831		REINSTATEMENT 4775		
				3. Date Incorporated or Qualified 08/06/1992	3a. Date of Last Report 01/23/1996	
2. Principal F	Place of Business I WINDING OAKS CIRC	2a. Mailing Address 26 4431 Wood	un Ora Gie	4. FET Number 59-3134735	Applied For Not Applicable	
Suite, Apl.	#, etc.	Suite, Apt. #, etc.	29 -7113	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	berry 7L	City & States	, 70	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 3384	Couplry	29 33 <i>860</i>	30 POLK	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032. Yes \[\] No	
	9. Name and Address of Currer	t Registered Agent	641	10. Name and Address of New Re	glatered Agent	
	CH, DANIEL		81 Name	DANIE! LYNCH)*	
	LANGRILYN-ST Eland fl 39813		4	82 Street Address (P.O. Bpx Number is Not Acceptable) 443 Winding Opts Circle 83		
			84 City	10.16	B5 Zip Qode	
11 Purcuent	to the provisions of Sections 607.050	2 and 607 1508. Florida Statute	the above named	organish submits this statement for the	FL 33860	
office or i	registered agent, or both, in the State	of Florida. Such change was a stippe of Section 607,0506. Flo	uthorized by the corp ride Statutes	corporation submits this statement for the poration's board of directors. I hereby acce	pt the appointment as registered	
SIGNATURE	All a self-line of the self-	- President	nua Statutes.	2/	5/98	
SIGNATURE		nt and life if applicable (NOTE	Registered Agent signature	reduces when installing)	7 ENT/E	
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	LYNCH, DAN H		1.1 TITLE 1.2 NAME	2000024	1264028	
STREET ADDRESS	1321 MERLYN ST.		1.3 STREET ADDRESS		9801032005	
CITY-ST-ZIP	LAKELAND FL 33813		1.4 CITY-ST-ZIP	******	0.00 ****900.00	
TITLE	VS	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	LYNCH, JEAN S		2.2 NAME			
STREET ADDRESS	1321 MERLYN ST.		2.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33813		2 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		Devete	3.4 C(1Y+ST-ZIP		Observe T Addition	
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME		<u> </u>	52 NAME		, _	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			54 CITY - ST - ZIP		11	
TITLE		☐ DELETE	61 INLE		ange Addition	
NAME			6.2 NAME		019	
STREET ADDRESS			6.3 STREET ADDRESS		110	
CITY-ST-ZIP			6.4 C(TY+ST+Z)P		$\mathcal{C}\mathcal{C}$	

14. I do 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.