


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90011 049 ***150.00

DOCUMENT # V69432 1. Entity Name RHON ERNEST-JONES CONSULTING ENGINEERS, INCORPORATED	
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Principal Place of Business 12500 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071 US	Mailing Address 12500 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04142008 Chg-P CR2E034 (12/06)

4. FEI Number 65-0362509	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ERNEST-JONES, S. RHON 10885 NW 6 STREET CORAL SPRINGS, FL 33071	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ERNEST-JONES, S. RHON 10885 NW 6TH ST CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMAS F. DONAHUE 1637 E. CLASSICAL BLVD DELRAY BEACH, FL 33445 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD ERNEST-JONES, ELLEN G 10885 NW 6TH ST CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV KURT H. KETTLEHUT 227 GOOLSBY BLVD DEERFIELD BEACH, FL 33442 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V E. GRAHAM ERNEST-JONES 2644 SW GREENWICH WAY PALM CITY, FL 34990 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRIAN STREET 1920 OAKMONT TERR CORAL SPRINGS, FL 33071 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CRAIG BENGE 11301 NW 498 DR CORAL SPRINGS, FL 33076 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ERIC GRANGER 6030 SW 21 ST. PLANTATION, FL 33317 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: S.P. Ernest Jones 4/18/08 954-741-1855
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V69432

FILED
Mar 08, 2007
Secretary of State

Entity Name: RHON ERNEST-JONES CONSULTING ENGINEERS, INCORPORATED

40077126

Current Principal Place of Business:

New Principal Place of Business:

12500 WEST ATLANTIC BLVD
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

New Mailing Address:

12500 WEST ATLANTIC BLVD
CORAL SPRINGS, FL 33071 US

FEI Number: 65-0362509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ERNEST-JONES, S. RHON
10885 NW 6 STREET
CORAL SPRINGS, FL 33071 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ERNEST-JONES, S. RHON
Address: 10885 NW 6TH ST
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VSTD () Delete
Name: ERNEST-JONES, ELLEN G
Address: 10885 NW 6TH ST
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Delete
Name: ERNEST-JONES, EDWARD G
Address: 2644 SW GREENWICH WAY
City-St-Zip: PALM CITY, FL 34990 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AV (X) Delete
Name: KETTELHUT, KURT H
Address: 227 GOOLSBY BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Delete
Name: DONAHUE, THOMAS F
Address: 1637 E. CLASSICAL BLVD
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLEN G. ERNEST-JONES

VSTD

03/08/2007

Electronic Signature of Signing Officer or Director

Date