

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 421811

1. Entity Name

BRPH ARCHITECTS ENGINEERS, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 91042 001 ***635.00

Principal Place of Business

Mailing Address

3275 SUNTREE BLVD.
 MELBOURNE FL 32940-4599

3275 SUNTREE BLVD.
 MELBOURNE FL 32940-7514

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1447471**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAW, LAWRENCE M
 4390 STILLWATER DR
 MERRITT ISLAND FL 32952

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
S	SIMPERS, M.R.	3595 JAMES RD	COCOA FL				
D	BRIEL, ERNEST M. JR.	401 ROXY	MELBOURNE FL				
T	GIFFORD, SUSAN B.	910 DELTA WAY	MELBOURNE FL				
V	SNIDER, MAX E.	547 DEERFIELD DRIVE	MELBOURNE FL				
VD	SHAW, LAWRENCE M.	4390 STILLWATER DR	MERRITT ISLAND FL				
VD	THRON, RANDALL E	457 BLUFF DRIVE	MELBOURNE FL				

I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan B. Gifford
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1, 2000
 Date

Daytime Phone #