

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 519610

**Entity Name:** BTL ENGINEERING SERVICES, INC.

**Current Principal Place of Business:**

5802 N OCCIDENT ST  
TAMPA, FL 33614

**FILED**  
**Apr 09, 2014**  
**Secretary of State**  
**CC3800191548**

**Current Mailing Address:**

P.O. BOX 15718  
TAMPA, FL 33684 US

**FEI Number: 59-1712528**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

BROWN, LARRY L  
3269 NICKS PLACE  
CLEARWATER, FL 33761 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

**Officer/Director Detail :**

Title D  
Name BROWN, JODY S  
Address 3269 NICKS PLACE  
City-State-Zip: CLEARWATER FL 33761

Title D  
Name LARRY, BROWN L  
Address 3269 NICKS PLACE  
City-State-Zip: CLEARWATER FL 33761

Title VP  
Name HAI, P.E., MOHAMMED A  
Address 8018 TERRACE RIDGE DRIVE  
City-State-Zip: TEMPLE TERRACE FL 33637

Title TSD  
Name WADDELL, CATHERINE A  
Address 14273 HAYS ROAD  
P.O. BOX 11113  
City-State-Zip: SPRING HILL FL 34610

Title PD  
Name WEST, STEPHEN A  
Address 5000 47TH AVENUE NORTH  
City-State-Zip: SAINT PETERSBURG FL 33709

*I hereby 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 all other like empowered.*

**SIGNATURE: CATHERINE A WADDELL**

**SECRETARY/TREASURER 04/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date