

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90418 012 ****50.00

DOCUMENT # L01000016533
 1. Entity Name
 FEI SURVEYING, L.C.



Principal Place of Business
 2579 TOLEDO BLADE BOULEVARD
 NORTH PORT, FL 34286

Mailing Address
 % JACK O. HACKETT II, ESQUIRE
 PO DRAWER 511447
 PUNTA GORDA, FL 33951-1447

24044539



DO NOT WRITE IN THIS SPACE

04012004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1143913	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 HACKETT, JACK O II ESQ.
 FARR, FARR, EMERICH, SIFRIT, ET AL.
 99 NESBIT STREET
 PUNTA GORDA, FL 33950

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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 _____

**Filing Fee is \$50.00
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FORD, STEVEN 2579 TOLEDO BLADE BLVD NORTH PORT, FL 34286
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 609, Florida Statutes.

SIGNATURE: Donald H. Ross 4/17/04 (941) 426-7878

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #