2005 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Apr 06, 2005 08:00 AM Secretary of State DOCUMENT # P02000133911 1. Entity Name GLENN PRICE - SURVEYING & MAPPING, INC. Principal Place of Business Mailing Address 38008 LIVE OAK AVENUE 38008 LIVE OAK AVENUE SUITE 1 SUITE 1 DADE CITY, FL 33526 DADE CITY, FL 33526 03022005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0439865 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MANN, R. SETH PA DO NOT WRITE 37941 MERIDIAN AVENUE DADE CITY, FL 33526 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PCFO TITLE U00000289916 PRICE, GLENN A NAME 04/06/05-80045-014 150.00 STREET ADDRESS 36937 JEFFERSON AVENUE DADE CITY, FL 33523 CITY-ST-ZIP TITLE

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 repower 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 fills empowered.

SIGNATURE:

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP

PRICE, JENNIFER D

DADE CITY, FL 33523

36937 JEFFERSON AVENUE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352/521-0441