

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000023640 (3)**

1. Corporation Name

PENSACOLA A-1 LAND SURVEYING, INC.



Principal Place of Business 504 E. WRIGHT ST. PENSACOLA FL 32501 US	Mailing Address 504 E. WRIGHT ST. PENSACOLA FL 32501 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/28/1994	
				4. FEI Number 59-3236718	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent ZICK, GARY 1800 E. LEE ST. PENSACOLA FL 32503				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

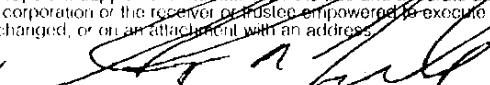
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZICK, GARY 1800 E. LEE ST. PENSACOLA FL 32503	☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	1.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	1.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	1.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.2 NAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.3 STREET ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

6/10/98

(850) 434-3739

CR2E034 (10/97)