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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000004972 (2) DOCUMENT #

FILED May 20 1998 8:00am Secretary of State

| BRITT | Surveying, Inc. | | | | | | | |
|--|--|---------------------------------|-------------------------|--------------------|-------------------------|--|------------------------------|--|
| Principal Place | e of Business | Mailing Address | | | | | | |
| 1426 WEST DUVAL STREET P.O. BOX 837 | | | | | | | | |
| LAKE CITY FI | | | LAKE CITY FL 32056-0837 | | | | | |
| | | | | | | DO NOT WRITE IN THIS | S SPACE | |
| | | | | | | 3. Date incorporated or Qualified | | |
| Principal P | lace of Business | 2a. Mailing Address | | | | 02/10/1995 4. FEI Number | Applied For | |
| 21 | | 26 | | | | 59-3298235 | Not Applicable | |
| Suite, Apt #, etc. | | Suite, Apt. #, otc. | | | | | \$8.75 Additional | |
| 22 | | [27] | | | | 5. Certificate of Status Desired | Fee Required | |
| City & State | | City & State | | | | 6. Election Campaign Financing | \$5.00 May Be | |
| 23 | | 28 | | | Trust Fund Contribution | Added to Fees | | |
| Zip | Country | ⊢ Zip | | untry | | 8. This corporation owes or has paid the c | — · — · (| |
| 24 | 25 Name and Address of Curren | 29] | 30 | т | | Personal Property Tax due June 30. | Yes No | |
| | | Lueñisteteo Wâsiti | | 81 | Name | 10. Name and Address of New Registere | 2 Agent | |
| BRITT, LAUREN E 1 128 w est duval street | | | | | 1101110 | | | |
| | KE CITY FL 32025 | | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptable) | | |
| L.A. | RE OHT PL 32023 | | | 83 | | | | |
| | | | | | | | | |
| | | | | 84 | City | F | 85 Zip Code | |
| 11. Pursuant office or r agent. I a SIGNATURE | to the provisions of Sections 607.0503 egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or protect name of toggreat open | ations of, Section 607,0505, F | lorida Sta | tutes | | oration submits this statement for the purpose ion's board of directors. I hereby accept the appropriate of the purpose of the | | |
| 12. | OFFICERS AND | | 13, | <u></u> - | | ADDITIONS/CHANGES TO OFFICERS AN | ND DIRECTORS IN 12 | |
| TITLE | D | DELETE | 1.1 T | ITLE | | | Change Addition | |
| NAME | | | 1.2 N | AME | | | 2 | |
| STREET ADDRESS | | | 1.3 S | 1.3 STREET ADDRESS | | | ورا | |
| CITY-ST-ZIP | LAKE CITY FL 32055 | | 1.4 C | ITY - ST | - 7(P | | | |
| TITLE | D BDITT MARRING | [_] DELETE | 2.1 🗓 | TLE | | | ☐ Change ☐ Addition C | |
| NAME | BRITT, MARTIN S | | 2 2 NAME | | | | | |
| STREET ADDRESS | 960 LENA LANE | | 2.3 STREE | | DDRESS | | | |
| CITY-ST-ZIP | SARASOTA FL 34240 | - DELETE | | CITY - ST | - ZIP | | | |
| TITLE | CULPEPPER, SANDRA B | ☐ DELĒTE | 3.1 T | | } | | Change Addition | |
| NAME CTRRET ADDRESS | 1030 ALBEE FARM ROAD | | 3.2 N | | DDDree | | | |
| STREET ADDRESS City-St-Zip | VENICE FL 34292 | | | | DDRESS | | | |
| TITLE | P | DELETE | 4.1 T | CITY-ST | · ZIP | | Change Addition | |
| NAME | BRITT, RANDALL E | | 4.21 | | | | | |
| STREET ADDRESS | 1452 KEYWAY RD | | - 1 | | DDRESS | | , | |
| CITY-ST-ZIP | ENGLEWOOD FL | | | ITY - ST | 1 | | | |
| TITLE | | DELETE | 5.1 T | | | | Change Addition | |
| NAME | | | 52 N | AME | | _ | The L | |
| STREET ADDRESS | | | 1 | | DORESS | | | |
| CITY-ST-ZIP | | | 5.4 C | ITY - ST | - ZIP | / | 1000 | |
| TITLE | | DELETE | 6.1 T | | | | Change Addition | |
| NAME | | | 6.2 N | AME | J | 4000025322 -05/22/98010020 ***150.00 | 34 | |
| STREET ADDRESS | | | 6.3 S | TREET A | DDRESS | -05/22/98010020 | 003 | |
| CITY-S1-ZIP | | | | ITY-ST | | ***150.00 | | |
| 14, I hereby o | certify that the information supplied wi | th this filing does not qualify | for the ex | empti | on stated in | Section 119.07(3)(i), Florida Statutes. I further to shall have the same lengt effect as if made to | 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 it made under oath; that I am an officer or director of 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 In address.

GNATURE:

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