


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90047 005 ***150.00

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1. Entity Name
 GEOTECH SURVEYING, INC.




Principal Place of Business Mailing Address
 1378 MALABAR RD., STE 2 1378 MALABAR RD., STE 2
 PALM BAY, FL 32907 US PALM BAY, FL 32907 US

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 2417 QUIMPER AVE 2417 QUIMPER AVE
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 PALM BAY FL PALM BAY FL

Zip Country Zip Country
 32909 BREVARD 32909 BREVARD



01172008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
 59-3472788 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

QUESNEL, STEPHEN
 2417 QUIMPER AVE SE
 PALM BAY, FL 32909

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP QUESNEL, STEPHEN W 2417 QUIMPER AVE SE PALM BAY, FL 32909 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST QUESNEL, KAREN L 2417 QUIMPER AVE SE PALM BAY, FL 32909 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver 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 like empowered.

SIGNATURE: *Stephen W. Quesnel* STEPHEN W. QUESNEL 2/6/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #