

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 12, 2009
Secretary of State**

DOCUMENT# S22759

Entity Name: BRUNER-MONGOVEN LAND SURVEYING, INC.

Current Principal Place of Business:

7603 MCELVEY ROAD
PANAMA CITY, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

P.O. DRAWER 14212
PANAMA CITY BEACH, FL 32413 US

New Mailing Address:

FEI Number: 59-3042259 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONGOVEN, MICHAEL W.
7603 MCELVEY ROAD
PANAMA CITY, FL 32408 US

Name and Address of New Registered Agent:

MONGOVEN, TIMOTHY J.
7603 MCELVEY ROAD
PANAMA CITY, FL 32408 US

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.

SIGNATURE: TIMOTHY J. MONGOVEN 10/12/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: MONGOVEN, TIMOTHY J
Address: 1515 WILDRIDGE RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: P () Delete
Name: MONGOVEN, MICHAEL W
Address: 1835 CINCINNATTI AVE.
City-St-Zip: PANAMA CITY, FL 32405

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONGOVEN, TIMOTHY J
Address: 1515 WILDRIDGE RD
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: V (X) Change () Addition
Name: MONGOVEN, GINGER S
Address: 1835 CINCINNATTI AVE.
City-St-Zip: PANAMA CITY, FL 32405 US

Title: S () Change (X) Addition
Name: BRUNER, SAM R.
Address: 7603 MCELEVEY ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY J. MONGOVEN P 10/12/2009
Electronic Signature of Signing Officer or Director Date