


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000063779</b> 1. Entity Name ACUTE LAND SURVEYING, INC.		
Principal Place of Business 1855 EAST FERN ROAD LAKE LAND, FL 33801	Mailing Address 1855 EAST FERN ROAD LAKE LAND, FL 33801	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  PATRINOSTRO, STEPHEN C 2011A SOUTH FLORIDA AVENUE LAKE LAND, FL 33803		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES REDDING, JAMES B PRES 1855 EAST FERN ROAD LAKE LAND, FL 33801	
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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: <i>James B. Redding</i> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <b>JAMES B. REDDING</b>		<b>4/18/06</b> <b>863 683 3906</b> <small>Date Daytime Phone #</small>



04072006 No Chg-P CR2E034 (11/05)

4. FEI Number  
02-0695651 Applied For  
Not Applicable

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

1100000527307  
05/04/06-80108-008 150.00

**DO NOT WRITE  
IN THIS SPACE**