

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000032216

**Entity Name:** ARNOLD SURVEYING, INC.

**Current Principal Place of Business:**

24 VERDE VISTA  
FORT PIERCE, FL 34951

**Current Mailing Address:**

4888 N KINGS HWY  
#425  
FORT PIERCE, FL 34951 US

**FEI Number:** 45-1561699

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ARNOLD, DENISE  
4888 N KINGS HWY  
#425  
FORT PIERCE, FL 34951 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY,  
                  TREASURER  
Name            ARNOLD, DENISE  
Address        4888 N KINGS HWY #425  
City-State-Zip: FORT PIERCE FL 34951

Title            DIRECTOR  
Name            ARNOLD, DENISE  
Address        4888 N KINGS HWY  
                  #425  
City-State-Zip: FORT PIERCE FL 34951

Title            DIRECTOR  
Name            ARNOLD, CHARLES  
Address        4888 N KINGS HWY  
                  #425  
City-State-Zip: FORT PIERCE FL 34951

Title            VP  
Name            CHARLES, ARNOLD  
Address        4888 N KINGS HWY  
                  #425  
City-State-Zip: FORT PIERCE FL 34951

*I hereby 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 all other like empowered.*

**SIGNATURE:** DENISE ARNOLD

**PRESIDENT**

**03/16/2013**

Electronic Signature of Signing Officer/Director Detail

Date