

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000095661

**Entity Name:** ASTRA SURVEYING, LLC**Current Principal Place of Business:**319 WEST TOWN PLACE, STE 25  
ST AUGUSTINE, FL 32092**Current Mailing Address:**319 WEST TOWN PLACE, STE 25  
ST AUGUSTINE, FL 32092 US**FEI Number:** 83-4389113**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CUTILLO, CHRISTIAN L  
413 EAST PARK AVE  
TALLAHASSEE, FL 32301 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

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	WATSON CIVIL CONSTRUCTION, INC.	Name	WATSON, JOHN D
Address	319 WEST TOWN PLACE, STE 25	Address	319 WEST TOWN PLACE, STE 25
City-State-Zip:	ST AUGUSTINE FL 32092	City-State-Zip:	ST AUGUSTINE FL 32092
Title	PRESIDENT	Title	AUTHORIZED REPRESENTATIVE
Name	LOPEZ-MORLOTE, DAGNI	Name	PEPLINSKI, CRAIG J
Address	319 WEST TOWN PLACE, STE 25	Address	319 WEST TOWN PLACE, STE 25
City-State-Zip:	ST AUGUSTINE FL 32092	City-State-Zip:	ST AUGUSTINE FL 32092
Title	AUTHORIZED REPRESENTATIVE	Title	SECRETARY
Name	HIRST, DAVID	Name	HODGINS, WESLEY
Address	319 WEST TOWN PLACE, STE 25	Address	319 WEST TOWN PLACE, STE 25
City-State-Zip:	ST AUGUSTINE FL 32092	City-State-Zip:	ST AUGUSTINE FL 32092
Title	TREASURER, SECRETARY		
Name	HUBERT, MICHELE D		
Address	319 WEST TOWN PLACE, STE 25		
City-State-Zip:	ST AUGUSTINE FL 32092		

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JOHN WATSON**AUTHORIZED  
REPRESENTATIVE**

01/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date