FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 631876

(0)

ALACHUA COUNTY LAND SURVEYORS, INC.

FILED
Apr 29 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address							
2512 NE 1ST BLVD. 2512 NE 1ST							
SUITE 200 SUITE 200						DO NOT WRITE IN THIS SPACE	
GAINESVILLE FL 82609 GAINESVILLE FL 32809					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
"		•				08/02/1979	- 1
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	ᅱ
21		26	<u> </u>			59-1906668 Not Applicable	le
 Suite, Apt. 	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional	\exists
22		27				Fee Required	_
City & Stat	Ө	City & State	⊢ ′			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	-
Zip	Country	Zip	Cour	ntry		Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible	[
24	25	29	30	,		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre					10. Name and Address of New Registered Agent	
l HA	ILL, STACY A		1	B1 1	Name		
68	6809 NW 90TH ST			B2 :	Street Addres	ess (P.O. Box Number is Not Acceptable)	\dashv
GA	UNESVILLE FL 32653						Ц
<u> </u>			1	B3			
1			la la	B4 (City	85 Zip Code	\dashv
dd Dyrayant	40 100 007 01	20 CO7 *CO0 F(FL 85 Zip Code	_
office or r	egistered agent, or both, in the State	or if Florida Such change was a	uthorized	ove-n by th	iamed corpo ne corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	1
l '	m familiar with, and account to oblig						
SIGNATURE	Signature, typed or plinted name of registered ag	ent and top if applicable UNOTE	YA.	HH. Agent	FLU f	PRESIDENT 4/23/98 DATE DATE	.
12.	11	ID DIRECTORS	13.	, iguint		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELET e	1.1 TITL	.E		Change Additio	ᆈᇵ
NAME	HALL, STACY A		1.2 NAN	ME .			
STREET ADDRESS	6809 NW 90TH ST		1.3 STR	EET AD	DRESS		6
CITY-\$T-ZIP	GAINESVILLE FL		1.4 CITY		7IP		_ 6
TITLE	V	₩ DELETE	2.1 TITL			Change Additio	۱۰
NAME	***************************************		2.2 NAM				
STREET ADDRESS	AANGONG CE EL		2.3 STR				Ī
CITY-\$T-ZIP TITLE	ST ST	DELETE	2. 4 CIT 3.1 TITL		ZIP	☐ Change ☐ Additio	\exists
NAME	JUNE E. HALL	final Decemb	3.1 INL			CHOINGE MURITU	"
STREET ADDRESS	6809 NW 90TH ST		3.3 STREE		ORESS		
CITY-ST-ZIP	GAINESVILLE FL		3.4. CITY-				
TITLE		☐ DELETE	4.1 TITL			☐ Change ☐ Additio	n
NAME			4. 2 NA	ME			
STREET ADDRESS	· ·		4.3 STR	EE1 AD	DRESS		
CITY-ST-ZIP			4.4 CITY-		ZIP		
TITLE		☐ DELETÉ	5.1 TITL	.E		Change Addition	n
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET		DRESS		
CITY-ST-ZIP		- Therese	5.4 CITY - S		?IP		_
TITLE		☐ DELETE	6.1 TITLE			Change Addition	a
NAME			6.2 NAME		55500		
STREET ADDRESS		1	6.3 STREET ADDRESS 6.4 City-St-Zip				
CITY-ST-ZIP						Continue 110 07/2Vi). Elevida Statuton Lituribar continue that the information	4

4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.