

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000613

Entity Name: TECHMAP, INC.

FILED
Apr 16, 2012
Secretary of State

Current Principal Place of Business:

1130 ECHO COURT
SUITE B
PEACHTREE CITY, GA 30269

New Principal Place of Business:

6 FALCON DRIVE
SUITE 100
PEACHTREE CITY, GA 30269

Current Mailing Address:

1130 ECHO COURT
SUITE B
PEACHTREE CITY, GA 30269

New Mailing Address:

6 FALCON DRIVE
SUITE 100
PEACHTREE CITY, GA 30269

FEI Number: 14-1858389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, JOHN E
1648 METROPOLITAN CIRCLE,
SUITE B
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP
Name: MATTHEWS, JOHN E
Address: 1648 METROPOLITAN CIRCLE,
City-St-Zip: TALLAHASSEE, FL 32308

Title: CP
Name: CHAPMAN, JENNIFER
Address: 140 IRISH LANE
City-St-Zip: TYRONE, GA 30290

Title: VCP
Name: OLIVE, LESLIE
Address: 135 POINTER RIDGE TRAIL
City-St-Zip: FAYETTVILLE, GA 30214

Title: S
Name: OLIVE, DARLA
Address: 406 CIMARRON PARK
City-St-Zip: PEACHTREE CITY, GA 30269

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: LESLIE OLIVE

CVP

04/16/2012

Electronic Signature of Signing Officer or Director

Date