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Apr 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000003199 (5)

1. Corporation Name

ANALYTICAL SURVEYS, INC.



Principal Place of Business

1935 JAMBOREE DR.  
STE. 100  
COLORADO SPRINGS CO 80920

Mailing Address

1935 JAMBOREE DR.  
STE. 100  
COLORADO SPRINGS CO 80920-5398

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

07/03/1995

3a. Date of Last Report

03/12/1996

4. FEI Number

84-0846389

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	ANDERSEN, WILLEM	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO	<input type="checkbox"/>
D	MACLEOD, RICHARD P	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO 80920	<input type="checkbox"/>
D	ROTH, JAMES DR	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO 80920	<input type="checkbox"/>
D	KEELEY, ROBERT DR	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO 80920	<input type="checkbox"/>
CTOC	THORPE, JOHN A	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO 80920	<input type="checkbox"/>
PCEO	CORDER, SIDNEY V	1935 JAMBOREE DR., SUITE 100	COLORADO SPRINGS CO 80920	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
T/S	SCOTT C. BENDER	1935 JAMBOREE DRIVE, SUITE 100	COLORADO SPRINGS, CO 80920	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	RAYMOND R. MANN	1935 JAMBOREE DRIVE, SUITE 100	COLORADO SPRINGS, CO 80920	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	WILLIAM NANTELL	741 N. GRAND AVENUE	WAUKESHA, WI 53186	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	JOHN A. THORPE	1935 JAMBOREE DRIVE, SUITE 100	COLORADO SPRINGS, CO 80920	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P/C	SIDNEY V. CORDER	1935 JAMBOREE DRIVE, SUITE 100	COLORADO SPRINGS, CO 80920	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby 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 supplemental 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 trustee 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/97

Date

7195930093

Daytime Phone