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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500005679 (4)

LANDMARK ENGINEERING AND LAND PLANNING, INC.

Principal Place of Business

3985 BENTWOOD LANE PENSACOLA FL 32533-9723 Mailing Address

3985 BENTWOOD LANE PENSACOLA FL 32533-9723

FILED Apr 30 1997 8:00am Secretary of State



					11/21/1995	06/	06/13/1996		
2. Principal F	Place of Business	2a. Mailing Address 26	7		4. FEI Number 59-3324564		A	oplied For of Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, ctc.			5. Certificate of Status Desired		¥ ·	Additional equired	
City & Stat	e	City & State			Election Campaign Financing Trust Fund Contribution	; 	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Z _I p	Country 30		8. This corporation has liability Florida Statutes		tav under s No	. 199.032,	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New	Registered /	Agent		
398	rznagel, mark 5 Bentwood Lane Isacola fl 32533-9723		81	Street Add	ress (P.O. Box Number is Not Accep	otable)			
			83						
			84	City		FL		Code	
agent la	to the provisions of Sections 607,050 ogistered agent, or both, in the State im familiar with, and accept the obligations.	∘ot Florida. Such change was	authorized by	named corp the corpora	poration submits this statement for the tion's board of directors. I hereby ac	e purpose of scept the appr	changing it pintment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered age	·	It Hugistried Ageu	t signature requ	red when reinstating)	DATE			
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OF	FICERS AND		IS IN 12	
TITLE	PTD	☐ DELETE	1.1 TITLE				Change	Addition	
NAME	SPITZNAGEL, MARK		1.2 NAME						
STREET ADDRESS	3985 BENTWOOD LANE		1.3 \$18EE1 A	DDRESS					
CITY-ST-ZIP	PENSACOLA FL 23		1.4 CITY - ST	- ZIP					
TITLE	VSD	DELETE	2171111				Change	Addition	
NAME	SPITZNAGEL, PAMELA		2.2 NAME						
STREET ADDRESS	3985 BENTWOOD LANE		2.3 STREET A	DOBH SS					
CITY-ST-ZIP	PENSACOLA FL 23		2 4 0117 - 51	!					
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		L3 off(If					Change	Addition	
NAME			5.2 NAME						
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CITY-ST-ZIP		——————————————————————————————————————	54 CITY - ST	ZIP					
TITLE		☐ DELETE	G 1 TITLE				L Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			63 STREET A	DDRESS					
CITY-ST-ZIP			6.4 C/TY-ST-	- ZIP					
44 14	and all the state of the state	the state of the s							

4. 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 it 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.