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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000005679

1. Corporation Name

LANDMARK ENGINEERING AND LAND PLANNING, INC.

Principal Place of Business	Mailing Address
3985 BENTWOOD LANE	3985 BENTWOOD LA
PENSACOLA FL 32533-9723	PENSACOLA FL 3253
12.10.1002112 02000 0720	. 2.10.1000

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90013 022 ***150.00



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Principal Place of Business Mailing Address												
3985 BENTWOOD LANE PENSACOLA FL 32533-9723 3985 BENTWOOD LANE PENSACOLA FL 32533-9723 PENSACOLA FL 32533-9723			3									
		SACOLA FL 32533-9723				DO NOT WRITE IF	DO NOT WRITE IN THIS SPACE					
								3. Date Incorporated or Qualifed				l
								11/21/1995				}
2. Principal Pl	ace of Busin	ness	2a.	Mailing Address				4. FEI Number.		App	ied For	
21			26					59-3324564		Not	Applicable	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	'5 Ac	ditional	
22			27,					5. Certificate of Status Desired	Fe	e Req	uired	: =
City & State	e			City & State				6. Election Campaign Financing	\$5.	00 N	lay Be	İ
23			28					Trust Fund Contribution	Ado	ded to	Fees	
Zip		Country		Zip Country		ntry		8. This corporation owes the current y	year Intangible	_		ļ
24		25	29		30			Personal Property Tax.			□No	
	9. Name	and Address of Curr	ent Regist	ered Agent		—т		10. Name and Address of New Regis	stered Agent			ł
CDIT	7814 OFL 1	1ADV				81	Name					
	ZNAGEL, N					82	Street Add	dress (P.O. Box Number is Not Acceptable))			1
l	BENTWO											1
PENS	SACULA FI	L 32533-9723				83						
						84	City		85	Zip Co	ode	
							Ť		FL			j
i office or re	enistered an	sions of Sections 607.0 ent, or both, in the Sta ith, and accept the obli	e of Florida	a. Such change was a	utnorized	DV 1	tne corporat	poration submits this statement for the purption's board of directors. I hereby accept the	oose of changing e appointment a	g its regi	egistered stered	
SIGNATURE												
	Signature, typed	or printed name of registered a				Agent	t signature requi		DATE	OTOF		-
12.	ATA .	OFFICERS A	AND DIREC		13.			ADDITIONS/CHANGES TO OFFICE			Addition	-
TITLE	PTD	DE: 1445W		☐ DELETÉ	1,1 TIT				☐ Chai	Ŋв	Addition	
NAME		GEL, MARK			12 NA	ME						l
STREET ADDRESS		NTWOOD LANE			1.3 ST	REET	ADDRESS					l
CiTY-\$T-ZiP		OLA FL 23			1.4 CF		r-zip				☐ Addition	1
TITLE	VSD	A		☐ DELETE	2.1 TIT	ĽΕ		•	Chai	nge	Addition	
NAME		GEL, PAMELA			2.2 NA	ME						
STREET ADDRESS		NTWOOD LANE			2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	PENSACE	OLA FL 23			_		T-ZIP			<u>==</u>		1=
TITLE				☐ DELETE	3.1 TIT		ļ		☐ Cha	nge	☐ Addition	ļ
NAME					3.2 NA							
STREET ADDRESS					3.3 ST	REET	ADDRESS					
CITY-ST-ZIP					3.4. CI		T-ZIP		□ Cha		Addition	1
, ture				☐ DELETE	4.1 TO				CJ Cha	ige	[] Addiabil	1
NAME					4.2 N							
STREET ADDRESS					4.3 ST	REET	ADDRESS					1
CITY-ST-ZIP					4.4 CF		Γ- ZIP		£-1 60		T \$ 33%; -	$\left\{ \right.$
TITLE				☐ DELETE	5.1 TT				☐ Cha	nge	Addition	1
NAME					5.2 NA							
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CI		T-ZIP				— A J J J D . —	1
TITLE				☐ DELETE	6.1 TT				☐ Cha	nge	☐ Addition	
NAME					6.2 NA							
STREET ADDRESS					6.3 ST	REET	ADDRESS					1

CITY-ST-ZIP 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP