## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## **FILED** Aug 06, 1999 8:00 am Secretary of State

08-06-1999 90003 043 \*\*\*550.00

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## DOCUMENT #

BUD HART SURVEYING, INC.

	Na.:Wan Addana			
Principal Place of Business P.O. BOX 115 P.O. BOX 115 (OKAWAHA 22179)	Mailing Address -P.O. SOX-115 P. O. BOX 115 (OKAWAHA-		DO NOT WRITE IN TH	HIS SDACE
SILVER-SPRINGS FL 34489-7115	Silver Springs FL 34489	/115	3. Date Incorporated or Qualified 12/31/1984	IIS SPACE
2. Principal Place of Business 21 550 5- War 314	2a Mailing Address	115	4. FEI Number 59-2494324	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<del></del>	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23 Chlausha T	28 Swey Sq	ings, <del>I</del> I	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 32279 25 U.S.P	Zip	Country Country	This corporation owes the current year     Intangible Personal Property.	Yes No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
HART, EUGENE F.  4765-SE 160TH COURT SOO SIM 33 0 0		81 Name 82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
O <del>KLAWAHA FL 34489</del> Se	25. Huy 319A Klanaha F1	83		
,	25120	84 City	F	85 Zip Code
Pursuant to the provisions of sections 60 office or registered agent, or both, in the agent. I am familiar with, and accept the	State of Florida. Such change was au	thorized by the corpor	poration submits this statement for the purpose o ation's board of directors. I hereby accept the ap	of changing its registered appointment as registered
SIGNATURE	and accel and title if governable. (NOTE	E: Registered Agent signature	required when reinstating) DAT	<u> </u>
Signature, typed or printed name of register  12. OFFICER	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
12. OFFICENCE AREA BIRLESTORIO		44.7171.5		

IN 12 □ Addition | | DELETE HART, EUGENE F. 1.2 NAME NAME 4755 GE-160TH COURT- 590 S Wany 314A 1.3 STREET ADDRESS STREET ADDRESS OKLAWAHA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DVP 2.1 TITLE Addition DELETE TITLE HART, BONNIE D. 2.2 NAME NAME 4755 SE 160TH COURT 590 S. Hun 3 LAA 2.3 STREET ADDRESS STREET ADDRESS OKLAWAHA FL 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE Change Addition TITLE DELETE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change 4,1 TITLE DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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

6.4 CITY-ST-ZIP

**SIGNATURE** 

CITY-ST-ZIP

CR2E034