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FILED

Apr 25 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 # H46503

(9)

1. Corporation Name  
TRI-COUNTY SURVEY, INC.



Principal Place of Business

Mailing Address

~~1475-B COLLINGSWOOD BLVD.~~  
~~PORT CHARLOTTE FL 33948~~  
~~US~~

~~1475-B COLLINGSWOOD BLVD.~~  
~~PORT CHARLOTTE FL 33948-1050~~  
~~US~~

2. Principal Place of Business  
21 675 Tamiami Trail

2a. Mailing Address  
26 675 Tamiami Trail

3. Date Incorporated or Qualified  
03/12/1985

3a. Date of Last Report  
08/07/1996

Suite, Apt. #, etc.  
22 Unit 1

Suite, Apt. #, etc.  
27 Unit 1

4. FEI Number  
59-2505893

Applied For  
Not Applicable

City & State  
23 Port Charlotte FL

City & State  
28 Port Charlotte FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip  
24 33953

Country  
25 Charlotte

Zip  
29 33953

Country  
30 Charlotte

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLEVELAND, KEITH L.  
1475-B COLLINGSWOOD BLVD.  
PORT CHARLOTTE FL 33948

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
675 Tamiami Trail Unit 1

83

84 City  
Port Charlotte

FL

85 Zip Code  
33953

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

*Keith L. Cleveland*  
Signature, typed or printed name of registered agent and title if applicable

Keith L. Cleveland, President

April 21, 1997

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PST  
CLEVELAND, KEITH L.  
1475-B COLLINGSWOOD BLVD.  
PORT CHARLOTTE FL

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
675 Tamiami Trail Unit 1  
Port Charlotte FL 33953

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

*Keith L. Cleveland*

Keith L. Cleveland, President April 21, 1997

CR2E034 (9/96)