

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H46503

Entity Name: TRI-COUNTY SURVEY, INC.

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

17880 TOLEDO BLADE BLVD. #101  
PORT CHARLOTTE, FL 33948 US

**New Principal Place of Business:**

17880 TOLEDO BLADE BLVD #101  
PORT CHARLOTTE, FL 33948 US

**Current Mailing Address:**

17880 TOLEDO BLADE BLVD. #101  
PORT CHARLOTTE, FL 33948 US

**New Mailing Address:**

FEI Number: 59-2505893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLEVELAND, KEITH L.  
17880 TOLEDO BLADE BLVD. #101  
PORT CHARLOTTE, FL 33948 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: CLEVELAND, KEITH L.  
Address: 17880 TOLEDO BLADE BLVD. #101  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP  
Name: YATES, ROBERT S  
Address: 17880 TOLEDO BLADE BLVD #101  
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KEITH L CLEVELAND

PST

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date