

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85688

FILED
Feb 02, 2011
Secretary of State

Entity Name: GEOHAZARDS, INCORPORATED

Current Principal Place of Business:

1204 NW 13TH STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14566
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 59-2636686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDAZZO, ANTHONY F
1925 NW 27TH STREET
GAINESVILLE, FL 32605 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: DR
Name: SMITH, DOUGLAS L
Address: 1826 NW 26TH WAY
City-St-Zip: GAINESVILLE, FL 32605

Title: DR
Name: RANDAZZO, ANTHONY F
Address: 1925 NW 27TH STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: MR.
Name: BLACK, GERALD O
Address: 628 NW FRONTIER DRIVE
City-St-Zip: LAKE CITY, FL 32055

Title: MR.
Name: PURCIFULL, SCOTT E
Address: 3714 NW 40TH STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: MR.
Name: RANDAZZO, ANTHONY K
Address: 19 ASHTON PLACE
City-St-Zip: GLEN ROCK, NJ 07452

Title: MR.
Name: SMITH, TRAVIS L
Address: 2429 MILLSTONE HARBOR DRIVE
City-St-Zip: RALEIGH, NC 27603

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: ANTHONY F. RANDAZZO

DR.

02/02/2011

Electronic Signature of Signing Officer or Director

Date