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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # J17971 (9)

1. Corporation Name

HOLT SURVEYING, INCORPORATED

95 MAR -6 AM 9:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5021 EGGLESTON AVENUE  
"A"  
ORLANDO FL 32804 - 1147  
US

P.O. BOX 608438  
P. O. BOX 608438  
ORLANDO FL 32810 - 8438  
US

DO NOT WRITE IN THIS SPACE.

|                                                                                                                                                     |                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 3. Date Incorporated or Qualified<br>05/30/1986                                                                                                     | 3a. Date of Last Report<br>02/03/1994 |
| 4. FEI Number<br>59-3046189                                                                                                                         | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                           | \$8.75 Additional<br>Fee Required     |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                  | \$5.00 May Be<br>Added to Fees        |
| 8. This corporation has liability for intangible tax under S. 193.032,<br>Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |                                       |

|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21                             | 26                  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| 22                             | 27                  |
| City & State                   | City & State        |
| 23                             | 28                  |
| Zip                            | Country             |
| 24                             | 25                  |
| 29                             | 30                  |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLT, MELISSA J.  
5813 MOAT COURT  
ORLANDO FL 32810 - 4973

|                                                       |             |
|-------------------------------------------------------|-------------|
| 81 Name                                               | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) |             |
| 83                                                    |             |
| 84 City                                               | FL          |

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

Signature typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required after recording)

DATE

| 12. OFFICERS AND DIRECTORS |                          | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                                            |
|----------------------------|--------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------|
| TITLE                      | PD                       | 1.1 TITLE                                             | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition    |
| NAME                       | HOLT, DONALD LEE         | 1.2 NAME                                              |                                                                                            |
| STREET ADDRESS             | 5813 MOAT COURT          | 1.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              | ORLANDO FL 32810 - 4973  | 1.4 CITY, ST, ZIP                                     | 32810 - 4973                                                                               |
| TITLE                      | S                        | 2.1 TITLE                                             | ST <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       | HOLT, MELISSA J.         | 2.2 NAME                                              |                                                                                            |
| STREET ADDRESS             | 5813 MOAT COURT          | 2.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              | ORLANDO, FL 32810 - 4973 | 2.4 CITY, ST, ZIP                                     | - 4973                                                                                     |
| TITLE                      |                          | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       |                          | 3.2 NAME                                              |                                                                                            |
| STREET ADDRESS             |                          | 3.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              |                          | 3.4 CITY, ST, ZIP                                     |                                                                                            |
| TITLE                      |                          | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       |                          | 4.2 NAME                                              |                                                                                            |
| STREET ADDRESS             |                          | 4.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              |                          | 4.4 CITY, ST, ZIP                                     |                                                                                            |
| TITLE                      |                          | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       |                          | 5.2 NAME                                              |                                                                                            |
| STREET ADDRESS             |                          | 5.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              |                          | 5.4 CITY, ST, ZIP                                     |                                                                                            |
| TITLE                      |                          | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                          |
| NAME                       |                          | 6.2 NAME                                              |                                                                                            |
| STREET ADDRESS             |                          | 6.3 STREET ADDRESS                                    |                                                                                            |
| CITY, ST, ZIP              |                          | 6.4 CITY, ST, ZIP                                     |                                                                                            |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information furnished in 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. I am an officer or director of the corporation or the receiver or trustee and I am required to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of (a) (b) (c) or (d) or (e) or (f) or (g) or (h) or (i) or (j) or (k) or (l) or (m) or (n) or (o) or (p) or (q) or (r) or (s) or (t) or (u) or (v) or (w) or (x) or (y) or (z) or (aa) or (ab) or (ac) or (ad) or (ae) or (af) or (ag) or (ah) or (ai) or (aj) or (ak) or (al) or (am) or (an) or (ao) or (ap) or (aq) or (ar) or (as) or (at) or (au) or (av) or (aw) or (ax) or (ay) or (az) or (ba) or (bb) or (bc) or (bd) or (be) or (bf) or (bg) or (bh) or (bi) or (bj) or (bk) or (bl) or (bm) or (bn) or (bo) or (bp) or (bq) or (br) or (bs) or (bt) or (bu) or (bv) or (bw) or (bx) or (by) or (bz) or (ca) or (cb) or (cc) or (cd) or (ce) or (cf) or (cg) or (ch) or (ci) or (cj) or (ck) or (cl) or (cm) or (cn) or (co) or (cp) or (cq) or (cr) or (cs) or (ct) or (cu) or (cv) or (cw) or (cx) or (cy) or (cz) or (da) or (db) or (dc) or (dd) or (de) or (df) or (dg) or (dh) or (di) or (dj) or (dk) or (dl) or (dm) or (dn) or (do) or (dp) or (dq) or (dr) or (ds) or (dt) or (du) or (dv) or (dw) or (dx) or (dy) or (dz) or (ea) or (eb) or (ec) or (ed) or (ee) or (ef) or (eg) or (eh) or (ei) or (ej) or (ek) or (el) or (em) or (en) or (eo) or (ep) or (eq) or (er) or (es) or (et) or (eu) or (ev) or (ew) or (ex) or (ey) or (ez) or (fa) or (fb) or (fc) or (fd) or (fe) or (ff) or (fg) or (fh) or (fi) or (fj) or (fk) or (fl) or (fm) or (fn) or (fo) or (fp) or (fq) or (fr) or (fs) or (ft) or (fu) or (fv) or (fw) or (fx) or (fy) or (fz) or (ga) or (gb) or (gc) or (gd) or (ge) or (gf) or (gg) or (gh) or (gi) or (gj) or (gk) or (gl) or (gm) or (gn) or (go) or (gp) or (gq) or (gr) or (gs) or (gt) or (gu) or (gv) or (gw) or (gx) or (gy) or (gz) or (ha) or (hb) or (hc) or (hd) or (he) or (hf) or (hg) or (hh) or (hi) or (hj) or (hk) or (hl) or (hm) or (hn) or (ho) or (hp) or (hq) or (hr) or (hs) or (ht) or (hu) or (hv) or (hw) or (hx) or (hy) or (hz) or (ia) or (ib) or (ic) or (id) or (ie) or (if) or (ig) or (ih) or (ii) or (ij) or (ik) or (il) or (im) or (in) or (io) or (ip) or (iq) or (ir) or (is) or (it) or (iu) or (iv) or (iw) or (ix) or (iy) or (iz) or (ja) or (jb) or (jc) or (jd) or (je) or (jf) or (jg) or (jh) or (ji) or (jj) or (jk) or (jl) or (jm) or (jn) or (jo) or (jp) or (jq) or (jr) or (js) or (jt) or (ju) or (jv) or (jw) or (jx) or (jy) or (jz) or (ka) or (kb) or (kc) or (kd) or (ke) or (kf) or (kg) or (kh) or (ki) or (kj) or (kk) or (kl) or (km) or (kn) or (ko) or (kp) or (kq) or (kr) or (ks) or (kt) or (ku) or (kv) or (kw) or (kx) or (ky) or (kz) or (la) or (lb) or (lc) or (ld) or (le) or (lf) or (lg) or (lh) or (li) or (lj) or (lk) or (ll) or (lm) or (ln) or (lo) or (lp) or (lq) or (lr) or (ls) or (lt) or (lu) or (lv) or (lw) or (lx) or (ly) or (lz) or (ma) or (mb) or (mc) or (md) or (me) or (mf) or (mg) or (mh) or (mi) or (mj) or (mk) or (ml) or (mm) or (mn) or (mo) or (mp) or (mq) or (mr) or (ms) or (mt) or (mu) or (mv) or (mw) or (mx) or (my) or (mz) or (na) or (nb) or (nc) or (nd) or (ne) or (nf) or (ng) or (nh) or (ni) or (nj) or (nk) or (nl) or (nm) or (nn) or (no) or (np) or (nq) or (nr) or (ns) or (nt) or (nu) or (nv) or (nw) or (nx) or (ny) or (nz) or (oa) or (ob) or (oc) or (od) or (oe) or (of) or (og) or (oh) or (oi) or (oj) or (ok) or (ol) or (om) or (on) or (oo) or (op) or (oq) or (or) or (os) or (ot) or (ou) or (ov) or (ow) or (ox) or (oy) or (oz) or (pa) or (pb) or (pc) or (pd) or (pe) or (pf) or (pg) or (ph) or (pi) or (pj) or (pk) or (pl) or (pm) or (pn) or (po) or (pp) or (pq) or (pr) or (ps) or (pt) or (pu) or (pv) or (pw) or (px) or (py) or (pz) or (qa) or (qb) or (qc) or (qd) or (qe) or (qf) or (qg) or (qh) or (qi) or (qj) or (qk) or (ql) or (qm) or (qn) or (qo) or (qp) or (qq) or (qr) or (qs) or (qt) or (qu) or (qv) or (qw) or (qx) or (qy) or (qz) or (ra) or (rb) or (rc) or (rd) or (re) or (rf) or (rg) or (rh) or (ri) or (rj) or (rk) or (rl) or (rm) or (rn) or (ro) or (rp) or (rq) or (rr) or (rs) or (rt) or (ru) or (rv) or (rw) or (rx) or (ry) or (rz) or (sa) or (sb) or (sc) or (sd) or (se) or (sf) or (sg) or (sh) or (si) or (sj) or (sk) or (sl) or (sm) or (sn) or (so) or (sp) or (sq) or (sr) or (ss) or (st) or (su) or (sv) or (sw) or (sx) or (sy) or (sz) or (ta) or (tb) or (tc) or (td) or (te) or (tf) or (tg) or (th) or (ti) or (tj) or (tk) or (tl) or (tm) or (tn) or (to) or (tp) or (tq) or (tr) or (ts) or (tt) or (tu) or (tv) or (tw) or (tx) or (ty) or (tz) or (ua) or (ub) or (uc) or (ud) or (ue) or (uf) or (ug) or (uh) or (ui) or (uj) or (uk) or (ul) or (um) or (un) or (uo) or (up) or (uq) or (ur) or (us) or (ut) or (uu) or (uv) or (uw) or (ux) or (uy) or (uz) or (va) or (vb) or (vc) or (vd) or (ve) or (vf) or (vg) or (vh) or (vi) or (vj) or (vk) or (vl) or (vm) or (vn) or (vo) or (vp) or (vq) or (vr) or (vs) or (vt) or (vu) or (vv) or (vw) or (vx) or (vy) or (vz) or (wa) or (wb) or (wc) or (wd) or (we) or (wf) or (wg) or (wh) or (wi) or (wj) or (wk) or (wl) or (wm) or (wn) or (wo) or (wp) or (wq) or (wr) or (ws) or (wt) or (wu) or (wv) or (ww) or (wx) or (wy) or (wz) or (xa) or (xb) or (xc) or (xd) or (xe) or (xf) or (xg) or (xh) or (xi) or (xj) or (xk) or (xl) or (xm) or (xn) or (xo) or (xp) or (xq) or (xr) or (xs) or (xt) or (xu) or (xv) or (xw) or (xx) or (xy) or (xz) or (ya) or (yb) or (yc) or (yd) or (ye) or (yf) or (yg) or (yh) or (yi) or (yj) or (yk) or (yl) or (ym) or (yn) or (yo) or (yp) or (yq) or (yr) or (ys) or (yt) or (yu) or (yv) or (yw) or (yx) or (yy) or (yz) or (za) or (zb) or (zc) or (zd) or (ze) or (zf) or (zg) or (zh) or (zi) or (zj) or (zk) or (zl) or (zm) or (zn) or (zo) or (zp) or (zq) or (zr) or (zs) or (zt) or (zu) or (zv) or (zw) or (zx) or (zy) or (zz)

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Melissa J. Holt  
MELISSA J. HOLT

1/19/95 407/629-0965