2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004
Secretary of State

DOCUMENT# J46442

Entity Name: DEGROVE SURVEYORS, INC.

Current Principal Place of Business:

2131 CORPORATE SQUARE BOULEVARD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

2131 CORPORATE SQUARE BOULEVARD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-2742509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NILES, GORDON RAY
2131 CORPORATE SQUARE BVLD
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

NILES, GORDON R PRES
2131 CORPORATE SQUARE BVLD
JACKSONVILLE, FL 32216 US

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: GORDON R. NILES 01/15/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NILES, GORDON RAY,
Address: 2131 CORPORATE SQUARE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD ( ) Delete
Name: TRACE, THOMAS P
Address: 2131 CORPORATE SQUARE BLVD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TREA ( ) Change (X) Addition
Name: NILES, MARY A
Address: 2131 CORPORATE SQUARE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARY A. NILES TREA 01/15/2004
Electronic Signature of Signing Officer or Director Date