FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K98641

1. Corporation Name

S.T.A.R. SURVEYING, INC.

FILED Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90029 007 ***150.00



			_				
Principal Place o	f Business	Ma	iling Address				
C/O ROBERT M. STILL 1130 E LEE BLVD			C/O ROBERT M. STILL 1130 E LEE BLVD			DO NOT WRITE IN THIS SPACE	
LEHIGH ACRES FL 33939			LEHIGH ACRES FL 33936 US			Date Incorporated or Qualifed	
US		00				06/28/1989 Applied For	
2. Principal Plac	ne of Business	2a.	Mailing Address			4, FLI NUMBER	1
21		26				\$8.75 Additional	
Suite, Apt. #,	etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required	
22		27	City & State			6. Election Campaign Financing \$5.00 May Be	
City & State		28	City & State			Trust Fund Contribution Added to Fees	l
23	Country	- 20;	Zip	Соц	ntry	8. This corporation owes the current year Intangible	1
Zip	25	29		30		Personal Property Tax. Yes UNO 10. Name and Address of New Registered Agent	1
24	9. Name and Address of Curren	t Regi	stered Agent		81 Name	10. Name and Address of New Rogiosal Control	
					1 - 1	No Accordable)	ł
STILL, ROBERT M.			82 Street Add			iress (P.O. Box Number is Not Acceptable)	
LEHIGH ACRES FL 33936					83	ー	\
LETIC	MIT MONES I E COCCO					85 Zip Code	1
					84 City	FL!	-
11. Pursuant to office or reagent. I an SIGNATURE	interior agent, and accept the obligation	ations o	of, Section 607.0505, F	lorida Sta	d by the corpora tutes. Dosider		a car
SIGNATURE	Signature, typed or printed name of registered age	ent and titl	*	13		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	(11/98
12.	OFFICERS A	אוט טוא	DELETE		TITLE	Change Addition	1 .
TITLE	PD Still, Robert M.			1.21	IAME		E034
NAME STREET ADDRESS	111 LEE BLVD.			1.3 3	STREET ADDRESS	•	5
CITY-ST-ZIP	LEHIGH ACRES FL			1.4	CITY-ST-ZIP	Change Addition	7 5
TITLE	VD		☐ DELETE	•	rmlE		
NAME	STILL, CHRISTOPHER B			I '	NAME		
STREET ADDRESS	111 LEE BLVD				STREET ADORESS		_
CITY-ST-ZIP	LEHIGH ACRES FL		□ DELETE	-	CITY-ST-ZIP TITLE	☐ Change ☐ Addition	1
TITLE COLD	STD				NAME		ļ
NAME A	STILL, PATRICIA B.			3.3	STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS	LEHIGH ACRES FL			3.4	CITY-ST-ZIP_	— Change ☐ Addition	<u>, </u>
TITLE	ELINON NONEO 12		☐ DELETE	4,1	TITLE	in the second se	
NAME				1	NAME		
STREET ADDRESS					STREET ADDRESS		
CITY-ST-ZIP			☐ DELETE		CITY-ST-ZIP	☐ Change ☐ Additio	آآر
TITLE			C) DELETE	1	NAME		
NAME					STREET ADDRESS	•	
STREET ADDRESS	F9			5.4	I CITY-ST-ZIP	TO A LIEST	
CITY-ST-ZIP	300.7 7 5		DELETE	6.	ITILE	Change Addition	71
TITLE	of the same				2 NAME	•	
NAME					3 STREET ADDRESS		
STREET ADDRESS	7I ·			2	A CITY-ST-7IP		

14. I 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 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 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 indicated on this annual report or supplemental annual report is true and accurate and that my server 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, with all other like empowered. CITY-ST-ZIP