


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # K98641 1. Entity Name S.T.A.R. SURVEYING, INC.	
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Principal Place of Business C/O ROBERT M. STILL 1130 E LEE BLVD LEHIGH ACRES, FL 33939 US	Mailing Address C/O ROBERT M. STILL 1130 E LEE BLVD LEHIGH ACRES, FL 33936 US
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01252005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0136785	Applied Fee Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STILL, ROBERT M. 1130 E LEE BLVD LEHIGH ACRES, FL 33936
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STILL, ROBERT M. 111 LEE BLVD. LEHIGH ACRES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STILL, CHRISTOPHER B 111 LEE BLVD. LEHIGH ACRES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD STILL, PATRICIA B. 111 LEE BLVD. LEHIGH ACRES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100000200612
10/28/05-80034-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Christopher B Still
CHRISTOPHER B STILL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-05

Date

239-368-7400

Daytime Phone #