2006 LIMITED LIABILITY COMPANY

May 02, 2006 8:00 am Secretary of State ANNUAL REPORT 05-02-2006 90045 031 ****50.00 DOCUMENT # L01000007676 MID-STATE SURVEYING & MAPPING, L.L.C. Principal Place of Business Mailing Address 20043320 1936 LEE ROAD SUITE 101 1936 LEE ROAD SUITE 101 C/O WEBSTER & PARTNERS, P.L. C/O WEBSTER & PARTNERS, P.L. WINTER PARK, FL 32789 WINTER PARK, FL 32789 2. Principal Place of Business 3. Mailing Address 450 N. Wymore Road 450 N. Wymore Road Suite, Apt. #, etc. Suite, Apt. #, etc. 04282006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For Winter Park Florida Florida 59-3718842 Winter Park Not Applicable Country \$5.00 Additional 32789 5. Certificate of Status Desired 32789 , USÁ USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent W & P SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1936 LEE ROAD SUITE 101 C/O WEBSTER & PARTNERS, P.L. WINTER PARK, FL 32789 450 N. Wymore Road Winter Park Zip Code 32789 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) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES **MGRP** TITLE Change ☐ Addition TITLE ☐ Delete MIZO, EDWARD J JR. NAME 450 N. Wymore Road Winter Park FL 32789 1936 LEE ROAD SUITE 101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 CITY-ST-ZIP MGRV ☐ Delete TITLE M Change Addition MIZO, CHARLES F NAME NAME 450 N. Wymore Road STREET ADDRESS 1936 LEE ROAD SUITE 101 STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 CITY-ST-ZIP Winter Park, FL 32789 ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: 1/0 SIGNATURE AND TYPED OR PRI D NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP

FILED

Dawn Bachan-Muckunlall

Paralegal

E-mail: dmuckunlall@wplawyers.com

April 28, 2006

COMMON SENSE APPROACH

VIA OVERNIGHT MAIL

Uniform Business Report **Division of Corporations** 2670 Executive Center Circle, Suite 100 Tallahassee, FL 32301

Mid-State Surveying & Mapping, LLC / 2006 Uniform Business Report

Ladies and Gentlemen:

Re:

Enclosed with this letter is the 2006 Uniform Business Report for the above referenced limited liability company. Also enclosed is check #1149 in the amount of \$50.00 for the filing of same.

Please contact our office if you have any questions.

Sincerely,

Dawn Bachan-Muckunlall

Paralegal

Enclosures