2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000016533

1. Entity Name FEI SURVEYING, L.C.



Principal Place of Business

2579 TOLEDO BLADE BOULEVARD NORTH PORT, FL 34286

Mailing Address

% JACK O. HACKETT II, ESQUIRE PO DRAWER 511447 PUNTA GORDA, FL 33951-1447

FILED Apr 16, 2004 8:00 am Secretary of State

04-16-2004 90418 012 ****50.00

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04012004 No Chg-LLC

CR2E083 (10/03)

| 4. FEI Number | | Applied For |
|----------------------------------|--------|----------------|
| 65-1143913 | | Not Applicable |
| 5. Certificate of Status Desired | \$5.00 | Additional |

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HACKETT, JACK O II ESQ. FARR, FARR, EMERICH, SIFRIT, ET AL.

6, Name and Address of Current Registered Agent.

99 NESBIT STREET PUNTA GORDA, FL 33950

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| The above named entity submits this statement for the purpose of cha the obligations of registered agent. | nging its registered office or registered agent, or both, in the | ne State of Florida. I am familiar with, and accept |
|---|--|---|
| SIGNATURE. Signature, typed or printed name of registered agent and title it applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE |
| Filing Fee is \$50.00 | | |

Due by May 1, 2004

| | 9. MANAGING MEMBERS/MANAGERS | | |
|---|--|---|--|
| | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR FORD, STEVEN 2579 TOLEDO BLADE BLVD NORTH PORT, FL 34286 | |
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11. 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 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.