FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # **GULF ATLANTIC SURVEYING, INC.** Principal Place of Business Mailing Address 121 HART STREET 121 HART STREET NICEVILLE FL 32578-1040 NICEVILLE FL 32578-1040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2990963 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GUSTIN IV. JOHN C 121 HART ST Street Address (P.O. Box Number is Not Acceptable) 82 NICEVILLE FL 32578 83 City 65 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change TITLE 1.1 TITLE MCELROY, ROBERT E NAME 1.2 NAME 121 HART ST STREET ADDRESS 1.3 STREET ADDRESS NICEVILLE FL CITY-ST-ZIP 1.4 CfTY-ST-ZIP DELETE Change TITLE 21 TITLE GUSTIN, JOHN C IV NAME 22 NAME 121 HART ST STREET ADDRESS 2.3 STREET ADDRESS **NICEVILLE FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE **GUSTIN, JOHN C III** NAME 3.2 NAME 121 HART ST STREET ADDRESS 3.3 STREET ADDRESS NICEVILLE FL CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE 4.1 TITLE Change BARTON, JAMES L NAME 4. 2 NAME 121 HART STREET STREET ADDRESS 4.3 STREET ADDRESS NICEVILLE FL

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 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 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

TITLE

NAME

TITLE

NAME

1/27/00

Change

Change

Addition

☐ Addition

Addition

___ Addition

Addition

Addition