

FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P00000066149*

1. Entity Name

FILED

03 SEP 30 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Foran Surveying Inc.

3. Mailing Address

Foran Surveying Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2001 W. Old Hwy 441 Suite 2

2001 W. Old Hwy 441 Suite 2

City & State

City & State

Mount Dora, Florida

Mt. Dora, Florida

Zip

Country

Zip

Country

32757

32757

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3657722

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

David A. Foran

Street Address (P.O. Box Number is Not Acceptable)

2001 W. Old Hwy 441 Suite 2

Mount Dora

FL

Zip Code
32757

**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.

SIGNATURE

D.A.F.

9-03-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE *PRESIDENT*
NAME *Foran, David A.*
STREET ADDRESS *2001 W. Old Hwy 441 Suite 2*
CITY-ST-ZIP *Mt. Dora, FL 32757*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
600023360186
*09/26/03--01039--022 **150.00*

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CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *D.A.F.* *DAVID A. FORAN*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-22-03 *(352)735-4007*

Date

Daytime Phone #

ATTACHMENT P00000066149

FORAN SURVEYING & MAPPING, INC.

David A. Foran, P.L.S.

2001 W. OLD HWY. 441, SUITE 2, MOUNT DORA, FL 32757 (352) 735-4007

NOTICE OF ADDRESS CHANGE!

WE HAVE RELOCATED OUR OFFICE TO:

FORAN SURVEYING AND MAPPING, INC.

2001 W. OLD HWY. 441

SUITE 2

MOUNT DORA, FL 32757

PHONE: (352) 735-4007

FAX: (352) 735-5335

2001 W. OLD HWY. 441, SUITE 2, MOUNT DORA, FL 32757 (352) 735-4007

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To whom it may concern:

I spoke with someone on the phone about our Uniform Business Report. We have moved and the address never got changed. They told me to use the Website to change the address, but I could not get through to change it. Please change the address to the current one we have provided. I was told to change the address and send the check for \$150.00 payable to the Department of State.

Thank you for your assistance.

Marcy Foran

2001 W. OLD HWY. 441, SUITE 2, MOUNT DORA, FL 32757 (352) 735-4007