

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108861

FILED
Mar 05, 2007
Secretary of State

Entity Name: W. M. COTHERN SURVEYING, INC.

Current Principal Place of Business:

946 E. ORANGE
LAKELAND, FL 33801

New Principal Place of Business:

946 E. ORANGE STREET
LAKELAND, FL 33801

Current Mailing Address:

946 E. ORANGE
LAKELAND, FL 33801

New Mailing Address:

946 E. ORANGE STREET
LAKELAND, FL 33801

FEI Number: 59-3687369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTHERN, W.M.
946 E. ORANGE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

COTHERN, W.M.
946 E. ORANGE STREET
LAKELAND, FL 33801 US

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: WM COTHERN

03/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COTHERN, WILLIAM M
Address: 946 E. ORANGE
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: COTHERN, DIANE E
Address: 946 E. ORANGE
City-St-Zip: LAKELAND, FL 33801

Title: D () Delete
Name: COTHERN, WILLIAM M JR
Address: 1637 MERRICK ROAD
City-St-Zip: LAKELAND, FL 33801

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COTHERN, WILLIAM M
Address: 4527 OAKGLEN ROAD
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Change () Addition
Name: COTHERN, DIANE E
Address: 4527 OAKGLEN ROAD
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Change () Addition
Name: COTHERN, WILLIAM M JR
Address: 1209 GREY FOX HOLLOW DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Change (X) Addition
Name: COTHERN, KATHERN F
Address: 1209 GREY FOX HOLLOW DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM M COTHERN

PRES

03/05/2007

Electronic Signature of Signing Officer or Director

Date