


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 21, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000009256**  
 1. Entity Name  
**RAY THOMPSON SURVEYING, INC.**



Principal Place of Business 4613 PHILIPS HWY SUITE 210 JACKSONVILLE, FL 32207	Mailing Address 4613 PHILIPS HWY SUITE 210 JACKSONVILLE, FL 32207
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01262006 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0542186  Applied For  
 Not Applicat.  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  
 THOMPSON, RAYMOND J  
 4613 PHILIPS HWY  
 SUITE 210  
 JACKSONVILLE, FL 32207

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD THOMPSON, RAYMOND J 4613 PHILIPS HWY SUITE 210 JACKSONVILLE, FL 32207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEASE, LINDA L 4613 PHILIPS HWY SUITE 210 JACKSONVILLE, FL 32207
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00000443131  
 03/04/06-80849-020 150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **RAYMOND THOMPSON** 02-15-06 904 448 5120