

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000126111

**FILED**  
**May 19, 2010**  
**Secretary of State**

**Entity Name:** MCMILLEN LAND SURVEYING, INC.

**Current Principal Place of Business:**

880 AIRPORT RD  
UNIT 105  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

880 AIRPORT RD  
UNIT 105  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

**FEI Number:** 54-2134333

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCMILLEN, DAVID  
8 PRAIREVIEW LANE  
ORMOND BEACH, FL 32174 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: MCMILLEN, DAVID  
Address: 8 PRAIREVIEW LANE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP  
Name: MCMILLEN, JULIE  
Address: 8 PRAIREVIEW LANE  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: DAVID MCMILLEN

PST

05/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date