2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119732

Entity Name: BROWN, HAAKER & OWEN, LAND SURVEYORS INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4421 NW 39TH AVE., SUITE 2-2 GAINESVILLE, FL 32606 **Current Mailing Address: New Mailing Address:** 4421 NW 39TH AVE., SUITE 2-2 GAINESVILLE, FL 32606 FEI Number: 20-3362552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAAKER, LORI 4421 NW 39TH AVE., SUITE 2-2 GAINESVILLE, FL 32606 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete () Change () Addition Name: HAAKER, ALAN J PSM Name: 4421 NW 39TH AVE., SUITE 2-2 Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: **TRES** Title: () Delete () Change () Addition Name: HAAKER LORI Name: 4421 NW 39TH AVE., SUITE 2-2 Address: Address: GAINESVILLE, FL 32606 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition OWEN, DAVID Name: Name: 4421 NW 39TH AVE., SUITE 2-2 Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: Title: SEC () Delete Title: (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

HAAKER, LORI

4421 NW 39TH AVE., SUITE 2-2

GAINESVILLE, FL 32606

SIGNATURE: LORI HAAKER SEC 04/29/2008

HALSNIK-OWEN, MICHELLE

GAINESVILLE, FL 32606

4421 NW 39TH AVE., SUITE 2-2

Name:

Address:

City-St-Zip: