

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Nov 12, 2009
Secretary of State**

DOCUMENT# P07000063723

Entity Name: FLOWERS SURVEYING AND MAPPING INC

Current Principal Place of Business:

207 SE CONDOR GLEN
HIGH SPRINGS, FL 32643 US

New Principal Place of Business:

Current Mailing Address:

207 SE CONDOR GLEN
HIGH SPRINGS, FL 32643 US

New Mailing Address:

FEI Number: 26-0270987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWILLEY, ROBERT
3742 BARBIZON CIRCLE SOUTH
JACKSONVILLE, FL 32257 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: PD () Delete
Name: SWILLEY, ROBERT
Address: 3742 BARBIZON CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: V () Delete
Name: FLOWERS, MIKE
Address: 207 SE CONDOR GLEN
City-St-Zip: HIGH SPRINGS, FL 32643 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VSTD (X) Change () Addition
Name: FLOWERS, MIKE
Address: 207 SE CONDOR GLEN
City-St-Zip: HIGH SPRINGS, FL 32643 US

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.

SIGNATURE: MIKE FLOWERS

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11/12/2009

Electronic Signature of Signing Officer or Director

Date