2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004
Secretary of State

DOCUMENT# P92000005916

Entity Name: GLOBAL SURVEYING, P.A.

Current Principal Place of Business:

5004 ST RD. 64 E
BRADENTON, FL 34208 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 20755
BRADENTON, FL 34203 US

New Mailing Address:

P O BOX 20755
BRADENTON, FL 34204 US

FEI Number: 65-0376281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROSS, ROBERT D
5004 ST. RD 64 E
BRADENTON, FL 34208 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete
Name: CROSS, ROBERT D
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP ( ) Delete
Name: MERCER, LOREN
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP ( ) Delete
Name: PURSLEY, TONY
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP ( ) Delete
Name: YORK, DAVID
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP ( ) Delete
Name: MORROW, JEFF
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: VP ( ) Change (X) Addition
Name: MASTRONICOLA, ARTHUR A
Address: 5004 S.R. 64 EAST
City-St-Zip: BRADENTON, FL 34208

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT D CROSS DPTS 04/23/2004
Electronic Signature of Signing Officer or Director Date