


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 09, 2006 08:00 AM
Secretary of State**

DOCUMENT # P93000015518 1. Entity Name MELTON SURVEYING, INC.		
Principal Place of Business 2406 JOAN AVE LOT 5 PANAMA CITY BCH, FL 32408 US	Mailing Address 2406 JOAN AVE LOT 5 PANAMA CITY BCH, FL 32408 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MELTON, ROBERT A 2406 JOAN AVE LOT 5 PANAMA CITY BEACH, FL 32408		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MELTON, ROBERT A 2406 JOAN AVE #5 PANAMA CITY BEACH, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SWANDOL, FREDERICK E 1516 OAK AVENUE PANAMA CITY, FL 32405	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD MELTON, DIANNA 2406 JOAN AVE, LOT 5 PANAMA CITY BCH, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u>DIANNA MELTON</u> 1/31/06 850/234-5447 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



02032006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3166161	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

1100000426457
02/20/06-80044-011 150.00

**DO NOT WRITE
IN THIS SPACE**