FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000016375 (6)

SEISMIC SURVEYING SERVICES, INC.

FILED Mar 13 1998 8:00am Secretary of State

CEIGHAC CONTENTION CENTROLOG	, , , , , , , , , , , , , , , , , , ,			
Principal Place of Business	Mailing Address		- T ORBIFORDI AND NOTARE SOUTH BREAK OUT IN DOING I	TOUR BROKE HANN HOUSEN BUILTOOK
8607 HAVERHILL STREET	8607 HAVERHILL STREET			
JACKSONVILLE FL 32211	JACKSONVILLE FL 32211			
			DO NOT WRITE IN THE	S SPACE
			3. Date Incorporated or Qualified	
			03/01/1993	
2. Principal Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21	26		59-3169357	Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		g; ostanosto or otatas bosnos	Fee Required
City & State	City & State		Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	7ip	Country	8. This corporation owes or has paid the c	
24 25 9, Name and Address of Curren	29]	30	Personal Property Tax due June 30.	Yes No
	it Hegistereo Agent	81 Name	10. Name and Address of New Registere	d Agent
COURTNEY, AMONS D JR		81 Name		
8607 HAVERHILL STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
JACKSONVILLE FL 32211				
		83		
		84 City		85 Zip Code
			F	L '
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. Lam familiar with, and accept the obligation. 	of Florida, Such change was a	uthorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered opointment as registered
SIGNATURE	,	-		
Signature: typod or printed name of registered age	otonotita d'applicable (NOTE	Registered Agent signature requ	red whon reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE D	DEFETE	1.1 TITLE	ourtray Amors D'Ir.	Change Addition
NAME COURTNEY, AMONS D JR		1.2 NAME		•
STREET ADDRESS 8607 HAVERHILL STREET		1.3 STREET ADDRESS \	5930 NE 6042 St.	
CHTY-ST-ZIP JACKSONVILLE FL 32211		1.4 CITY-ST-ZIP	1926 HE ROTEING	,
TITLE D	☐ DELETE	2.1 TITLE	Minh	Change Addition
NAME MOORE, MADELINE J			loore Maddine 31	•
STREET ADDRESS 8607 HAVERHILL STREET		23 STREET ADDRESS	5930 NE 6032 3.	
CITY-ST-ZIP JACKSONVILLE FL 32211		2 4 CITY-ST-ZIP	Dillichn Il 30686	
TITLE	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADORESS		3 3 STREET ADDRESS		
CIFY-ST-ZIP		3 4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		İ
CHY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME	•	5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY - ST - ZIP		5 4 CITY-ST-ZIP		
TITLE	DELETE	61 TITLE		Change Addition
NAME		6.2 NAME		C outride C Lengtrois
STREET ADDRESS				1
City-St-Zip		6.3 STREET ADDRESS		
Unit-31-OF I		6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if chapter or an attachment with an address.

SIGNATURE:

AD Courtney Jr

39-98

1896-866-65