## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

Principal Place of Business

SIGNATURE:

P93000020372 (7)

Mailing Address

CAMPBELL SURVEYING AND MAPPING OF BREVARD, INC.

3525 N. COURTENAY PKWY MERRITT ISLAND FL 32953		3525 N. COURTENA' MERRITT ISLAND FL			
				3. Date incorporated or Qualified 03/15/1993	3a. Date of Last Report 04/25/1995
Principal Place of Business     The Principal Place of Business		2a. Mailing Address 26		4. FE! Number 59-3172732	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	······································	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Crty & State 28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
7ip <b>24</b>	Country 25	Zip 29	Country 30		ntangible tax under s 199.032, ☐ No
	g. Name and Address of Cul	rent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
3525 N	Bell, John R I. Courtenay Pkwy		82 Street Add	lress (P.O. Box Number is Not Acceptable	e)
MERRIT	TT ISLAND FL 32953		83		
			84 City		FL 85 Zip Code
U: registere	io agent, or both, in the State of F	502 and 607.1508, Florida Statute lorida: Such change was authorize lection 607.0505, Florida Statutes.	s, the above named corpord by the corporation's boa	ration submits this statement for the purp red of directors. Thereby accept the appe	nose of changing its registered office pintment as registered agent. Lam
SIGNATURE	kjinature, typod or printed name of registered a	givit and the if applicable . (No.)	(E. Rigi Aried Agest sgranie, reigni	Liwhor democrating	DAIE
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TIFE	D CAMPBELL TOLKED	☐ DELETE	1. 1 10: E		Change Addition
NAME DIGECT ADDRESS	CAMPBELL, JOHN R 3525 N. COURTENAY PI	VIAIV	1.2 NAME		
STREET ADDRESS CITY - ST - ZIP	MERRITT ISLAND FL 32		13 STREET ADDRESS		
TITLE	11000101000	DELETE	14 City - \$3 - 749 2 1 Title		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP	····		2.4.0(TY+ST+Z)P		
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STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY+ST-ZIP		ĺ
TITLE	* · · · · · · · · · · · · · · · · · · ·	DELETE	4 1 HILE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CHY-SI-ZIP			4.4.CITY - ST - 7IP		
TITLE		☐ DELETE	5 1 TIFLE		Change 🔲 Addition
NAME CIDELL ADDRESS			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS		
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STREET ADDRESS			6 3 STREET ADDRESS		
CAV CL 7.D			C 4 017 4 61 740		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 12 if changed, or on an attachment with an address.