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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000021209 (9)

W. W. CURLE LAND SURVEYING, INC.

Principal Place	e of Business	Mailing Address	·						
1900 M HWY 8	7	1900 M HWY 87	v						
NAVARRE FL 3		NAVARRE FL 32586							
US		US							
						3. Date Incorporated or Qualified		e of Last F	Report
						03/15/1994	05/2	9/1996	
	race of Business	2a. Mailing Address				4. FEI Number		A	oplied For
21		26				59-3231656		No	ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27				C. Delimodic of Claice Desired	·····	Fee R	equired
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28	r			Trust Fund Contribution	ليا	Added	to Fees
Zip	Country		Country			8. This corporation has liability for in			. 199.032,
24	25 29		30			Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Reg	listered A	gent	
	ILE, JR W W			B1	Name				
1309	ARIOLA		82 Street Ac			dress (P.O. Box Number is Not Acceptable)			
PEN	SACOLA BEACH FL 32581								
			ſ	63					
			-	В4	City			[65] 7in	O. d.
			i	D4	City		FL	85 Zip	Code
11. Pursuanti	to the provisions of Sections 607.05	02 and 607.1508, Florida Statuti	es, the ab	ove-	named corp	oration submits this statement for the prior's board of directors. I hereby accep	rpose of	changing i	ts registered
office or ri agent I a	egistored agent, or both, in the Stati in familiar with, and accept the obliq	e of Florida. Such change was a gations of, Section 607.0505, Flo	authorized orida Statu	i by Jies.	the corporati	ion's board of directors. I hereby accep	t the appo	intment as	registered
SIGNATURE	Signature, typed or profited name of registered as	gerr and tile if applicable (NOTI	E Registered	Agen	t signature require	ed when reinstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	RS IN 12
TELE	P	☐ DELETE	1.1 [1]	LE				Change	☐ Addition
NAME	CURLE, JR W W		1.2 NA	ME					
STREET ADDRESS	1309 ARIOLA		1.3 STF	REET A	DDRESS				
C-TY - ST - ZIP	PENSACOLA BEACH FL		1.4 CIT	1.4 CITY-ST-ZIP					
TITLE	ST	DELETE	2.1 1(1)					Change	Addition
NAME	CURLE, KATHRYN H		2,2 NA	ME					
STREET ADDRESS	130 ARIOLA		2.3 ST8	RFFT A	DDRESS				
C(TY+\$1+Z)P	PENSACOLA BEACH FL			2. 4 CITY-ST-ZIP					
TITLE	T CHONOUD (DESCRIPT)	DELETE	DELETE 3.1 TITLE		~2IF		·····	Change	Addition
NAME			3.2 NAI					5.20.190	Aug / Iddition
STREET ADDRESS					DDOECC				
					DORESS				
CITY - ST - ZIP TITLE		DELETE	3.4. CIT		- 2117		· · · · · · · · · · · · · · · · · · · 	Change	Addition
		L OLCLIC	4.1 TITI				'	T CHRUNG	L Addition
NAME			4. 2 NA						
STREET ADDRESS					DORESS				
CITY-SI-ZIP		The eve	4.4 CIT		· ZIP			-	
THE		☐ DELETE	5.1 7671				ı	Change	Addition
NAV?			5.2 NA	ME					
STREET ADDRESS			5.3 STF	REET A	DDRESS				
CITY - \$1 - 7IP			5.4 CIT	Y-ST	- ZIP				
Tille		☐ DELETE	6.1 TIT	LE				Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 STF	REET A	DDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST	- ZIP				

SIGNATURE:

14. I do 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or an antiachtient with an address.

FILED

Apr 23 1997 8:00am

Secretary of State