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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000039488 (9)

SULLIVAN SURVEYING, INC.

JULLIV	AN OUNTERING, INC.								
Principal Plac	e of Business	Mailing Address					00:80 HAIR FULL		AIDI IELI LUUI
1318 W OAK STE 4	ST	1318 W OAK ST STE 4							
KISSIMMEE FL 34741		KISSIMMEE FL 34741				DO NOT WRITE IN THIS SPACE			
US	_	US				3. Date Incorporated or Qualified 05/25/1994			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		F	\pplied For	
21		26				59-3245345		٨	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.					□ \$	8.75	Additional
22		27				C. Cosmodic of oldred Boshed		Fee F	Required
City & State	8	City & State				6. Election Campaign Financing) Мау Ве
Zip Country		Zip Country						to Fees	
24	25	⊢ ¬ '		шу		8. This corporation owes or has paid			
24	9. Name and Address of Curre	29 29 Agent	30			Personal Property Tax due June 30 10. Name and Address of New Regis			□ No
ĆI II	LLIVAN, RICHARD C			81	Name	10. Italiic ziid Addibaa oi Italii Ilagii	stered Ager		
	IS W OAK ST			⅃.					
STE			8	B2	Street Addres	ss (P.O. Box Number is Not Acceptable))		
	SIMMEE FL 34741		E	33					
l Ma	DIMMEE FL 34/41		Ĺ						
			8	34	City		FL 85	Zip	Code
agent. I ai SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered as	gations of, Section 607.0505, F	Iorida Statu	tes.	the corporation	ration submits this statement for the pur n's board of directors. I hereby accept t when reinstating)	the appointr	iont as	s registered
12.	OFFICERS AF	VD DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	RS AND DIR	ECTO	RS IN 12
TITLE	, •		1.1 100	1.1 TOLE				Change	Addition
NAME	S ULLIVAN, RICHARD C	1.21		1.2 NAME					
STREET ADDRESS	1318 W OAK ST STE 4	1.3 \$		HELT ADDRESS					
CITY-ST-ZIP	KISSIMMEE FL			14 CITY+S1+ZIP					
TITLE		DELETE 2		21 HTLF				Change	Addition
NAME			2 2 NAME						
STREET ADDRESS			2.3 STRE	EE1 AI	DDRESS				
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NAME			3.2 NAM						
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			4.1 TITLE				L,	Change	Addition
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STREET ADDRESS			4 3 STRF		ł				
CITY-ST-ZIP TITLE		DETETE	5.1 TITLE		ZIP			hange	Addition
NAME			5.2 NAM				، بہا	mange	Notation
STREET ADDRESS			5.2 NAM 5.3 STRE		nnetss				
CITY-ST-ZIP			5.4 CITY						
TITLE		DELETE	6.1 TITLE		žII			hange	Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STRE		DORESS				
				-	1				

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 607, or on an attachment with an address.

SIGNATURE ALCE

Duranna Kallan

12 100 (4M) 925-178A4

FILED

Jan 15 1998 8:00am

Secretary of State

R2E034 (10/97)