

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

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CORPORATION
ANNUAL REPORT
1995



FLORIDA SECRETARY OF STATE
TALLAHASSEE, FLORIDA
3500 GULF BLVD., SUITE 100
TALLAHASSEE, FLORIDA 32309-4000

95 MAR -7 PM 1:48

DOCUMENT # P94000056233 (7)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PALM COAST SURVEYS, INC.

1. Principal Place of Business 4631 NW 31 AVE SUITE 182 FT LAUDERDALE FL 33309		2a. Mailing Address 4631 NW 31 AVE SUITE 182 FT LAUDERDALE FL 33309		3. Date of Report 07/28/1994	
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEIN Number		5. Date of Last Report 07/28/1994	
22. Date of Report	27. State of Report	5. Certificate of Status Required ☐		8.75 Additional Fee Required	
23. City & State	28. City & State	6. Election Campaign Financing Fund Fund Contribution ☐		5.00 May Be Added to Fees	
24. Zip	29. Zip	8. The corporation has liability for a tangible tax under S. 109.037, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent WARREN, EARL J 4631 NW 31 AVE SUITE 182 FT LAUDERDALE FL 33309		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am hereby warr, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	WARREN, EARL J	1.2 NAME	
STREET ADDRESS	4631 NW 31 AVE SUITE 182	1.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL 33309	1.4 CITY, ST, ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, JOE	2.2 NAME	
STREET ADDRESS	4631 NW 31 AVE SUITE 182	2.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL 33309	2.4 CITY, ST, ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	SLOAN, LARRY R	3.2 NAME	
STREET ADDRESS	4631 NW 31 AVE SUITE 182	3.3 STREET ADDRESS	
CITY, ST, ZIP	FT LAUDERDALE FL 33309	3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 110.07(5)(b), Florida Statutes. I further certify that the information is made available to the public in accordance with the provisions of the Freedom of Information Act and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of this report. I will change my name and address with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

EARL J. WARREN

2/15/95

392-8646