

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR -6 AM 7:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075896 (8)

1. Corporation Name

HILLSBOROUGH SURVEYING, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report

10/13/1994

4. FEI Number Applied For
59-3272320 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

3735 THONOTOSASSA ROAD
PLANT CITY FL 33564

P.O. BOX 782
PLANT CITY FL 33564

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

RICHEY, THOMAS D JR.
3735 THONOTOSASSA ROAD
PLANT CITY FL 33564

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when certifying)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME RICHEY, THOMAS D JR.
STREET ADDRESS 3735 THONOTOSASSA ROAD
CITY, ST, ZIP PLANT CITY FL 33564

11 TITLE T/S ☐ Change ☒ Addition
12 NAME Patty Richey
13 STREET ADDRESS 3735 Thonotosassa Rd.
14 CITY, ST, ZIP Plant City, Fla. 33564 ☐ Change ☐ Addition

TITLE D
NAME TEW, TIMOTHY W
STREET ADDRESS 507 E. DREW STREET
CITY, ST, ZIP PLANT CITY FL 33565

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

TITLE D
NAME RICHEY, DAVID G
STREET ADDRESS 4003 THONOTOSASSA ROAD
CITY, ST, ZIP PLANT CITY FL 33568

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

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)(b), 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas D. Richey, Jr.

3/31/95 813-752-0234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas D. Richey, Jr.