2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91889 006 ***158.75

044603 AV

DOCUMENT # P94000075896

1. Entity Name
HILLSBOROUGH SURVEYING, INC.

Principal Place of Business	Mailing Address
1804 W BAKER ST SUITE A PLANT CITY FL 33566 US	1804 W BAKER ST SUITE A PLANT CITY FL 33566 US

11040545

2. Principal Place of Business	3. Mailing Address
302 N. Palm Dr.	302 N. Palm Dr.
Suite, Apt. #, etc.: Suite 102	Suite, Apt. #, etc.: Suite 102
City & State: Plant City, FL	City & State: Plant City, FL
Zip: 33563 Country: USA	Zip: 33563 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3272320 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TEW, TIMOTHY W 1804 W BAKER STREET SUITE A PLANT CITY FL 33566	Name: Timothy W. Tew Street Address (P.O. Box Number is Not Acceptable): 302 N. Palm Dr. Suite 102 City: Plant City FL Zip Code: 33563

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Timothy W Tew DATE: 4/30/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TEW, TIMOTHY W 1912 HOLLOWAY RD PLANT CITY FL 33567	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TEW, VICKIE L 1912 HOLLOWAY RD PLANT CITY FL 33567	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vickie L. Tew [SIGNATURE REQUIRED] Date: 4/30/03 Daytime Phone #: (813) 707-9086

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR