

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000076153

FILED
May 01, 2003
Secretary of State

Entity Name: OLDE ISLE SURVEYING & MAPPING COMPANY

Current Principal Place of Business:

493 NORTH US HIGHWAY 17
SUITE #2
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

493 NORTH US HIGHWAY 17
SUITE #2
YULEE, FL 32097 US

New Mailing Address:

FEI Number: 59-3399916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, WESLEY R
303 CENTRE ST, SUITE 200
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOFFMAN, STEPHEN W
Address: 1897 FAYE ROAD
City-St-Zip: YULEE, FL 32097

Title: S (X) Delete
Name: HOFFMAN, JEANETTE C
Address: 3275 BELLEVILLE LANE
City-St-Zip: YULEE, FL 32097

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN W. HOFFMAN

P

05/01/2003

Electronic Signature of Signing Officer or Director

Date