

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90035 036 ***158.75

DOCUMENT # P97000030979

1. Entity Name
MOORE SURVEYING & DESIGN, INC.



Principal Place of Business
**5390 ORTEGA BLVD
JACKSONVILLE, FL 32210**

Mailing Address
**5390 ORTEGA BLVD
JACKSONVILLE, FL 32210**

94014015



01062004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3436322

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**HAYES, DENNIS E
2320 THE WOODS DR W
JACKSONVILLE, FL 32246**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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-STATE-ZIP
**D
MOORE, HAROLD W
5900 TOWNSEND ROAD #611
JACKSONVILLE, FL 32244** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**5125 ORTEGA FARMS BLVD.
JACKSONVILLE FL 32210** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
DENISE, MOORE L
5900 TOWNSEND ROAD #611
JACKSONVILLE, FL 32244** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**5125 ORTEGA FARMS BLVD.
JACKSONVILLE FL 32210** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ Delete

TITLE
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☐ Change ☐ Addition

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 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HAROLD W. MOORE 1/6/2004 (904) 384-7855

Attachment

P97000030979

IMPORTANTIMPORTANT***

PLEASE NOTE OUR COMPANY NAME HAS CHANGED TO:

MOORE SURVEYING & DESIGN, INC.

OUR PHONE & ADDRESS WILL REMAIN THE SAME
PLEASE ADJUST YOUR RECORDS ACCORDINGLY