2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000057857

Title:

Name:

Address:

City-St-Zip:

VΡ

THIE, DARYL I

5773 NORMANDY BLVD.

JACKSONVILLE, FL 32205

(X) Delete

FILED Sep 03, 2009 Secretary of State

Entity Name: BRADLEY SURVEYING AND MAPPING, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	MANDY BLVD VILLE, FL 3220	5			
Current Mailing Address:			New Mailing Address:		
	MANDY BLVD VILLE, FL 3220	5			
FEI Number:	59-3459376	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	RNOLD J MANDY BLVD VILLE, FL 3220	5 US			
The above in the State		ubmits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
		s Signature of Registered Ager		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () I JOHNS, ARNOLI 5773 NORMAND JACKSONVILLE,	Y BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () I JENKINS, RICHA 5773 NORMAND JACKSONVILLE,	Y BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I JOHNSON, DON 5773 NORMAND JACKSONVILLE	Y BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ARNOLD J. JOHNS PTD 09/03/2009

() Change () Addition