FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000021849

COOK SURVEYING & MAPPING, INC.

Principal Place of Business

Mailing Address

FILED Mar 31, 1999 8:00 am **Secretary of State**

03-31-1999 90014 001 ***150.00



513 SUNNY CIRCLE WINTER HAVEN FL 33880		513 SUNNY CIRCLE WINTER HAVEN FL 33880		DO NOT WRITE IN THIS SPACE				
	•				3. Date incorporated or Qualified 03/06/1998			
2 Principal P	lace of Business	2a. Mailing Address		. 4.2	4. FEI Number 59 - 3500 406	h	applied For lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired ·	\$8.75 Additional		
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	- 11		
Zip	Country	Zip			8. This corporation owes the current year	Intangible LYes	□No	
24	25		30		Personal Property Tax.		UND	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent		
AT.	MANAN POPERT		81	Name				
Stambaugh, Robert J 99 Sixth Street, Sw			82	Street Add	Address (P.O. Box Number is Not Acceptable)			
WIN	TER HAVEN FL 33883		83	3				
	÷		84	City	F	L 85 Zip	Code	
agent. I a SIGNATURE	m familiar with, and accept the obligitions of the obligition of the obligation of the obligition of the obligition of the obligition of t				ed when reinstating) DATE			
12.	OFFICERS AND DIRECTORS 13				ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	COOK, D. STEVE		1.2 NAME	. }				
STREET ADDRESS	513 SUNNY CIRCLE		1.3 STREE	ET ADDRESS				
CITY-SY-ZIP	WINTER HAVEN FL 33880		1.4 CITY-1	}	•			
TITLE	STD	☐ DELETE	2.1 TITLE			Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS	513 SUNNY CIRCLE		2.3 STREE	ET ADDRESS		-7	- · · ·	
CITY-ST-ZIP	WINTER HAVEN FL 33880	·	2.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE	}		Change	Addition	
NAME			3.2 NAME	}				
STREET ADDRESS			3.3 STREE	ET ADDRESS				
CITY-ST-ZIP	<u></u>		3.4. C/TY-	ST-ZIP				
MLE	•	☐ OELETE	4.1 TITLE	}		Change	Additio	
			4, 2 NAME	: }				
; ADÓRESS		•	4.3 STREE	ET ADORESS	,	•		
. ST-2IP			4.4 C/TY-1			<u></u>	F-1 6 3 3 7 7 1	
	}	DELETE	5.1 TITLE	(, '	Change	a 🔲 Additio	

6.4 CITY-ST-ZIP 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 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 this 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, with all other like empowered.

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE

6.3 STREET ADDRESS

WARR CONTR

100

DELETE

2914074

[] Change

Addition

CR2E034 (11/98)