2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004367

Entity Name: CONSOLIDATED SURVEY INC

FILED Jan 25, 2005 Secretary of State

of Business			
Current Principal Place of Business:		New Principal Place of Business:	
533 N. NOVA RD., SUITE 113 ORMOND BCH, FL 32174		140 S. ATLANTIC , SUITE 501 ORMOND BCH, FL 32176	
Current Mailing Address:		New Mailing Address:	
533 N. NOVA RD., SUITE 113 ORMOND BCH, FL 32174		140 S. ATLANTIC., SUITE 501 ORMOND BCH, FL 32176	
FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
	purpose of changing its registere	d office or registered agent, or both,	
nic Signature of Registered Ag	ent	Date	
g Trust Fund Contribution ().			
TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
NIEL E NAVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
) Delete CIA	Title: Name:	() Change () Addition	
	74 55: E 113 74 FEI Number Applied For () Current Registered Agent: 32114 US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution (). FTORS:) Delete NIEL E A AVE. 1, FL 32114) Delete	New Mailing Addres E 113 T4 140 S. ATLANTIC., St. ORMOND BCH, FL 3 FEI Number Applied For () FEI Number Not Applicable () Current Registered Agent: Name and Address of Submits this statement for the purpose of changing its registered agent in a stat	

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: PATRICIA FAXON D 01/25/2005