2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 11, 2007
Secretary of State

DOCUMENT# P99000110336

Entity Name: GEOMARKS LAND SURVEYORS, INC.

Current Principal Place of Business:

8408 E COLONIAL DR
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

8408 E COLONIAL DR
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 59-3615012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAUSEY-CAMPBELL, ETHEL L
4905 LAKE GATLIN WOODS CT
ORLANDO, FL 32806 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

OFFICERS AND DIRECTORS:

Title: DS ( ) Delete
Name: CAUSEY-CAMPBELL, ETHEL L
Address: 4905 LAKE GATLIN WOODS CT
City-St-Zip: ORLANDO, FL 32806

Title: V ( ) Delete
Name: HALL, EDWIN H
Address: 555 GATOR BAIT LN
City-St-Zip: OAK HILL, FL 32759

Title: S ( ) Delete
Name: KNOX, RITA L
Address: 10353 ARBOR RIDGE TRL
City-St-Zip: ORLANDO, FL 32817

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: SPROUSE, ANDREA M
Address: 845 VIRGINIA WOODS LANE
City-St-Zip: ORLANDO, FL 32824

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

Title: V ( ) Change (X) Addition
Name: HARRIS, KELLY B
Address: 180 GLENCOVE DR
City-St-Zip: DELTONA, FL 32738

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.

SIGNATURE: RITA L KNOX S 05/11/2007

Electronic Signature of Signing Officer or Director — Date