2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S18942

FILED Mar 25, 2009 Secretary of State

Entity Name: ALTAMONTE SURVEYING AND PLATTING, INC.

| urrent P | Principal Place | of Busines | ss: | New Principal Place | e of Business: |
|--|--|---|---|---------------------------------------|---|
| | GLAS AVENUE NTE SPRINGS | | US | | |
| urrent Mailing Address: | | | | New Mailing Address: | |
| .O. BOX LTAMON | 161094 NTE SPRINGS | , FL 32714 | US | | |
| El Number | : 59-3059020 | FEI Numbe | r Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| ame and | d Address of (| Current Reg | istered Agent: | Name and Address | of New Registered Agent: |
| | , MICHAEL W. ITLEY DRIVE |) US | | | |
| | OD, FL 32779 | , 03 | | | |
| ONGWC | · | | statement for the | purpose of changing its register | ed office or registered agent, or both, |
| ONGWC | e named entity e of Florida. | | statement for the | purpose of changing its register | ed office or registered agent, or both, |
| ONGWC he above the Stat | e named entity e of Florida. RE: | submits this | statement for the | | ed office or registered agent, or both, Date |
| ONGWC ne above the Stati GNATU | e named entity e of Florida. RE: | submits this | e of Registered Ag | | |
| ONGWC ne above the State IGNATU ection Ca | e named entity e of Florida. RE: Electror | submits this nic Signature g Trust Fund | e of Registered Ag | ent | |
| ONGWC ne above the State IGNATU ection Ca | e named entity e of Florida. RE: Electror mpaign Financin S AND DIREC | submits this nic Signature g Trust Fund TORS:) Delete HAEL W., Y DRIVE | e of Registered Ag | ent | Date |
| ongwone above the State GNATU ection Carection | e named entity e of Florida. RE: Electron mpaign Financin S AND DIREC PST (SOLITRO, MIC 870 BRANTLE' LONGWOOD, | submits this nic Signature g Trust Fund TORS:) Delete HAEL W., Y DRIVE FL 32779) Delete OTT A | e of Registered Ag Contribution (). | ADDITIONS/CHANG Title: Name: Address: | Date BES TO OFFICERS AND DIRECTORS |

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: MICHAEL W. SOLITRO PRES 03/25/2009