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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

SIGNATURE AND TYPED OF PR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 28 1997 8:00am

Secretary of State

(96/6)

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # \$31984

(5)

Mailing Address

ARC SURVEYING & MAPPING, INC.

5202 SAN JUAN AVENUE 5202 SAN JUAN AVENUE JACKSONVILLE FL 32210 JACKSONVILLE FL 32210-3140 3a. Date of Last Report 3. Date Incorporated or Qualified 02/14/1991 07/08/1996 Applied For 2a. Mailing Address 2. Principal Place of Business 4. FEI Number 59-3125280 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Z_{10} Country $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SAWYER, JOHN **5202 SAN JUAN AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Supporture its wild or printed minute of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change noitibbA 🔲 1.1 DILE THE SAWYER, JOHN F. 1.2 NAME 12315 MUSCOVY DRIVE 1.3 STREET ADDRESS STREET ACORESS JACKSONVILLE FL OTY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE JENKINS, RICHARD J. 2.2 NAME 5202 SAN JUAN AVENUE 2.3 STREET ADDRESS SURPLICATIONESS JACKSONVILLE FL 2.4 CITY-ST-ZIP 04 t - S1 - 702 DELETE Change Addition TITLE 3.1 TITLE SAWYER, RICHARD J. NAME 3.2 NAME 5202 SAN JUAN AVENUE STREET ATOMESS 3.3 STREET ADDRESS JACKSONVILLE FL 3.4. CITY - ST - ZIP DELETE 41 TITLE Change Addition TILLE 4. 2 NAME Dale V. Traylor NAME 4.3 STREET ADDRESS STREET LADORESS Jacksonville, FL 4.4 CITY - ST - ZIP CITY-ST-ZH Change DELETE Addition HILE 5.1 TITL€ 5.2 NAME MAINE 5.3 STREET ADDRESS STREET ADDRESS ONY-ST Z# 5.4 CITY - ST - ZIP DELETE Change ... Addition 6.1 TITLE THE 6.2 NAME MAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 City-St-ZiP

14. To do the eby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida Statutes. I further certify that the information and called 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.