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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S44394

(2)

S & H LAND SURVEY CO., INC.

FILED	
May 04 1998 8:00an	1
Secretary of State	

Principal Plac	e of Business	Mailing Address									
13591 MCGREGOR BLVD 13591 MCGREGOR BLVD SUITE 21 SUITE 21 FT MYERS FL 33919 FT MYERS FL 33919						DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qu	alitied				
2. Principal P	lace of Business	2a. Mailing Address				04/10/1991 4. FEI Number		 -	☐ Ar	oplied For	
21]_ ් න	AME	26 SAME				65-0262529			 	ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.	pt. #, etc.			5. Certificate of Status Des	irad		\$8.75	Additional	
22 27						a, Certificate of Statos Des			Fee Re	equired	
City & Stat	City & State				6. Election Campaign Final	ncing		\$5.00			
Zip	Country	28	Country			Trust Fund Contribution			Added 1		
24	25	29	30	y		This corporation owes o Personal Property Tax d		_	· -	tangible 7 No	
[24]	9. Name and Address of Cur		1301			10. Name and Address of					
e C	HUMANN, RONALD L.		81	1	Name	······································		<u> </u>			
	591 MCGREGOR BLVD		B2	١.,	Circol Addra	on (D.O. Pay Number in Net A					
	ITE 21		62	Ϊ,	Stiest Addie	ss (P.O. Box Number is Not A	cceptati	лет			
	MYERS FL 33919		83								
			84	١,	City			 1.	85 Zip (Code	
	to the provisions of Sections 607.0		ŀ		•			FLI			
agent I a SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the ob- Signature, typed or printed name of registered	agent and title if applicable (NOTI	orida Statute E: Rogistered Age	5.		d when reinstating)		DATE			
12.	D	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO	JUFFIL		Change	Addition	
NAME	SCHUMANN, RONALD L	C) otter	1.1 TILE		1			L) Change	L Addition	
STREET ADDRESS	13591 MCGREGOR BLVD.,	CTE 21	1.3 STREET ADDRESS								
CITY-ST-ZIP	MT LIVERS EL ASSAS			ST-2	1						
TITLE	DELETE 2			31-2					Change	Addition	
NAME			2.2 NAME		ł				-		
STREET ADDRESS			2.3 STREET ADDRESS		DRESS						
CITY-ST-ZIP] 2			ST-	2IP						
TITLE	DELETE 3.						Change	Addition			
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET	T AD	DRESS						
CITY-ST-ZIP	M		3.4. CITY-:	ST-	ZIP				1		
TITLE								L	Change	☐ Addition	
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET		1						
CITY-ST-ZIP TITLE		DELETE	4.4 C(TY - 5 5.1 TITLE	51 - Z	ZIP				Change	Addition	
NAME			5.1 INLE 5.2 NAME					L_	1 Charige	Addition	
STREET ADDRESS			5.3 STREET	יחעי	DRESS						
CiTY-ST-ZIP			5.4 CITY-S		· -						
TITLE		DELETE	6.1 TITLE			·—————————————————————————————————————			Change	Addition	
NAME		- - -	6.2 NAME					_	-		
STREET ADDRESS	1		6.3 STREET	T ADI	ORESS						
CITY-ST-ZIP			6.4 CITY - S		- 1						
14. Thereby o	certify that the information supplied on this annual report or supplemental	d with this filing does not qualify fo	or the exemp	otio	n stated in S	ection 119.07(3)(i), Florida Sta	itutes. I	further certif	y that the	information	
officer or	on this armual report or suppleme director of the corporation or the r or Block 13 if changed, or on an a	eceiver or trustee empowered to e									

SIGNATURE: B. L. Schumann RONALD L. SCHUMANN 4/28/98 94/ 48/ 28 6