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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

S61333

(8)

RIDGE ENGINEERING & SURVEYING, INC.

)
Principal Place of Business Mailing Address						
805 NW 2ND		P.O. BOX 441				
MULBERRY FL 33860 US		MULBERRY FL 33860 US	MULBERRY FL 33860		DO NOT WRITE IN THIS SPACE	
**		00			3. Date Incorporated or Qualified	
L					06/17/1991	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26 Suite, Apt. #, etc.		Suite Apt # etc	26		59-3081598	Not Applicable
22		27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	}		6. Election Campaign Financing	\$5.00 May Be
Zip	Country Zip Co		Countr		Trust Fund Contribution	Added to Fees
24	25	29	30	,	 This corporation owes or has paid the corporate Personal Property Tax due June 30. 	urrent year Intangible ☐ Yes No
	g, Name and Address of Curre	nt Registered Agent	1001		10. Name and Address of New Registered	
WILSON, DONALD H., JR.				Name		
150 E DAVIDSON ST.			82	Stroot Add	ress (P.O. Box Number is Not Acceptable)	
BARTOW FL 33830			83		ress (F.O. Box Number is Not Acceptable)	
ļ						
			84	City	Fi	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida, Such change was authorized by agent. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes					posstion submits this statement for the surpage	of changing its registered pointment as registered
SIGNATURE		there of boston of boston in	orida olaidio	.		
- SIGNATORE	Signature, typed or printed name of migistired ag-		f.: Registered Ag	ent signature requi	ired when reinstating) DATE	
12.		ID DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	DPS	DELETE	1.1 TITLE			Change
NAME	AMMERMANN, FRED P.		1.2 NAME			
STREET ADDRESS	6511 LONGOAK CT		1.3 STHEET			į
CITY-ST-ZIP	LAKELAND FL V	DELETE	1.4 C(TY-5	ST-ZIP		
TITLE NAME	•	☐ VECETE	2.1 TITLE			Change Addition
·	Ann Alle Ann Aller		2.2 NAME			
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP TITLE			2. 4 CITY - 3.1 TITLE	ST-ZIP		Change Addition
NAME	WHAT PROJECT D IN		3.2 NAME			C) Change C Addition
STREET ADORESS	3008 GREENMOUNT ROAD			ADDOTOR		
CITY-ST-ZIP	QRLANDO FL 32806		3.3 STREET	4		
TITLE	ONDANDO FE SZOO	DELETE	3.4. CITY - 1 4.1 TITLE	S1 - ZIP		Change Addition
NAME			4. 2 NAME			C outligo C Notition
STREET ADDRESS			4.3 STREET	ADDDECC		
CITY-ST-ZIP			4.4 CITY - S			
TITLE		DELETE	5.1 Trile	1-211		Change Addition
NAME			5.2 NAME			C Guanta C Judgitan
STREET ADDRESS			5.3 STREET	ADORESS		
CITY-ST-ZIP			5.4 CITY - S			
TITLE		DELETE	6.1 TITLE	1. CH		Change Addition
NAME	•	Marie	62 NAME			T clouds T vacation
STREET ADDRESS			6.3 STREET	Annerse		
CITY-ST-ZIP			6.4 CITY - S			
			O O			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated 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 or an attachment with an address.