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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # 490127

(8)

TOWN & COUNTRY LAWN & TRACTOR CORPORATION

Principal Place of Business Mailing Address								il gib il b ibit i		
386 GORDON ROAD NEWNAN GA 30263		386 GORDON ROAD NEWNAN GA 30263-5328								
			_			3. Date Incorporated or Qualified 11/18/1975	i	of Last R 1/1996	eport	
2. Principal Pla 21	ace of Business	2a. Mailing Address				4. FEI Number 59-1631778		\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	oplied For ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75 / Fee Re	Additional	
City & State		City & State	City & State			6 Flastics Conspice Figure			<u> </u>	
23	•	28				Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1		
Zφ	Country	Zip	Cou	ntry		This corporation has liability for				
24	25	29	30			Florida Statutes	Yes 🔀	No		
	9. Name and Address of Curre	nt Registered Agent		1		10. Name and Address of New Re	gistered A	gent		
	TERMAN, EDWARD			81	Name					
5900 S.W. 73 ST.				82 Street Address (P.O. Box Number is Not Acceptable)						
MIAN	AI FL 33143			83						
				03						
				84	City		FL	85 Zip 1	Code	
44 Pursuant t	to the provisions of Sections 607.05	02 and 607 1508 Florida Statute	e the al	ากนร	a-named con	poration submits this statement for the p		phanoing if	te registered	
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized	d by	the corpora	tion's board of directors. I hereby acce	of the appo	intment as	registered	
	m famil ar with, and accept the obliq	janons or, section 607.0305, mo	nda Stat	uies	s.					
SIGNATURE	Signature, typed or printed name of regiser and ag	per and title Lappicable (NOTE	Angistere	d Age	ent signature requ	red when reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOP	1S IN 12	
TITLE	P	☐ DELETE	1.1 17	ſLE			[Change	Addition Addition	
NAME	KUNSE, RALPH A		1.2 N/	AME						
STREET ADDRESS	386 GORDON ROAD		1.3 STREET ADDRESS							
CITY - ST - ZIP	NEWNAN GA	Doctor	1.4 CITY-ST-ZIP					100	1.122	
TITLE	VP	☐ DELETE	2 1 TITLE				L	Change	☐ Addition	
NAME	AZUZ, VALENCIA 102 EDGEWATER WAY		2.2 NA							
STREET ADDRESS	PEACHTREE CITY GA		1	2 3 STREET ADDRESS 2 4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE	ST	DELETE	3 1 TI		51-211			Change	Addition	
NAME	KUNSE, NARICE N		32 N/					— Sucues	1.00000	
STREET ADDRESS	386 GORDON ROAD				ADDRESS					
CITY - ST - ZIP	NEWNAN GA				ST-ZIP					
TITLE		☐ DELETE	4 1 Ti					Change	Addition	
NAME			4 2 N	AME						
STREET ADDRESS			4 3 S	REET	ADDRESS					
CITY-SI-7IP			4.4 0)	1Y - S	T-ZIP					
THLE		☐ DELETE	51 TI	TLE			[Change	Addition	
NAME			5.2 N	4MÉ	Ì				'	
STREET ADDRESS			5.3 ST	REET	ADDRESS					
CITY - ST - ZIP		Detere			IT - ZIP			<u> </u>		
TITLE		☐ DELETE	6.1 TI					Change	Add:tion	
NAME	l		6.2 N							
STREET ADURESS	•				ADDRESS					
14. Ldo hereb	L	ed with this filing does not qualit		_	T-ZIP	ed in Section 119.07(3)(i). Florida Statute	s. I further	certify that	the	
informatio	in indicated on this armual report or fricer or director of the corporation on Block 12 or Block 13 if champed	supplemental annual report is to	rue and a	SXBC	urate and tha	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as Statutes; an	if made un d that my i	ider oath; that name	