

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**


**APPROVED AND FILED**

**95 APR 24 AM 7:32**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

**CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morpam  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # L26721 (5)**

1. Corporation Name  
**MANCUSO BROTHERS LAWN MAINTENANCE, INC.**

Principal Place of Business      Mailing Address

**C/O ROBERT MANCUSO  
16040 JUPITER FARMS ROAD  
JUPITER FL 33478  
US**

**C/O ROBERT MANCUSO  
16040 JUPITER FARMS ROAD  
JUPITER FL 33478  
US**

2. Principal Place of Business      2a. Mailing Address

21      26

Suite, Apt. #, etc.      Suite, Apt. #, etc.

22      27

City & State      City & State

23      28

Zip      Country      Zip      Country

24      25      29      30

3. Date Incorporated or Qualified      3a. Date of Last Report

**10/31/1989**      **05/01/1994**

4. FEI Number      Applied For / Not Applicable

**65-0139824**

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under S. 193.032, Florida Statutes       Yes       No

9. Name and Address of Current Registered Agent

**MANCUSO, ROBERT  
16040 JUPITER FARMS RD  
JUPITER FL 33478**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City      85 Zip Code

**FL**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>MANCUSO, ROBERT</b>
STREET ADDRESS	<b>16040 JUPITER FARMS ROAD</b>
CITY - ST - ZIP	<b>JUPITER FL</b>
TITLE	<b>D</b>
NAME	<b>MANCUSO, RHONA</b>
STREET ADDRESS	<b>16040 JUPITER FARMS ROAD</b>
CITY - ST - ZIP	<b>JUPITER FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 manager 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 checked, or on an attachment with an address.

SIGNATURE: Robert Mancuso Vice-Pres 4/18/95 407-575-0916  
Rhona Mancuso

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR