

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L67694** (4)

1. Corporation Name
GENESIS PROPERTY AND LANDSCAPE MANAGEMENT SERVICE, INC.



Principal Place of Business: **1100 N 31 CT HOLLYWOOD FL 33021**
Mailing Address: **1100 N 31 CT HOLLYWOOD FL 33021**

2. Principal Place of Business: [21] State, Apt. #, etc.; [22] City & State; [23] Zip; [24] Country
2a. Mailing Address: [26] State, Apt. #, etc.; [27] City & State; [28] Zip; [29] Country

3. Date Incorporated or Qualified: **04/20/1990**
3a. Date of Last Report: **02/28/1995**
4. FEI Number: **65-0255483**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**WARRICK, ROGER, W
1100 N 31 CT
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.1504, 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 607.05(2), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WARRICK, ROGER W.	1. NAME	
STREET ADDRESS	1100 N. 31ST COURT	1. STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	1. CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FATOUT, STEVEN, J	2. NAME	
STREET ADDRESS	2811 ADAMS ST	2. STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	2. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY-ST-ZIP		3. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY-ST-ZIP		4. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY-ST-ZIP		5. CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY-ST-ZIP		6. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntary, true and correct and does not qualify for the exemption stated in Section 19.073(a), Florida Statutes. I further certify that the information stated 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 entrusted to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 13 of changes of an attachment with an address.

SIGNATURE: *Roger W. Warrick* **Roger W. Warrick** **4/10/96** **954-922-4230**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)