2004 FOR PROFIT CORPORATION ANNUAL REPORT

9/24/2004-90002-031-$150.00-$150.00

1of2

FILED
04 OCT 28 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000026811

1. Entity Name
THE GROUNDSKEEPER OF OVIEDO, INC.

Principal Place of Business	Mailing Address
1968 KINDLING CT CASSELBERRY, FL 32707	1968 KINDLING CT CASSELBERRY, FL 32707

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

09212004 Chg-P CR2E034 (10/03)

4. FEI Number 05 0558456 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CLARK, SCOTT D 655 W MORSE BLVD SUITE 212 WINTER PARK, FL 32789	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST JONES, ROBERT M 1968 KINDLING CT CASSELBERRY, FL 32707 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition

11-2-04

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert M. Jones ROBERT M. JONES 9/21/04 407-733-9698
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Feb 2

TO WHOM IT MAY CONCERN:

I AM WRITING TO YOU TO APPEAL THE FEE FOR NOT FILING THE ANNUAL REPORT ON TIME. I STARTED MY BUSINESS IN MARCH 2003 AND I WAS NOT AWARE THAT THIS WAS AN ANNUAL REQUIREMENT. MY ATTORNEY PROVIDED ME WITH A LIST OF THINGS THAT I WOULD HAVE TO DO LIKE FILEING FOR THE "S" CORPORATION AND QUARTERLY TAXES; HE DID NOT MENTION A YEARLY FILING WITH THE STATE. I DO NOT REMEMBER SEEING A NOTICE UNTIL I GOT THE NOTICE OF INTENT TO DISOLVE. I AM STRUGGLING TO SURVIVE IN THIS BUSINESS AND AN ADDITIONAL $400.00 CHARGE WOULD BE OVERWEALMING, PLEASE CONSIDER WAIVING THIS FEE THIS YEAR AND I WILL FILE ON TIME FROM NOW ON,

THANKS,

Robert M Jones

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