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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000085208 (1)

WEST FLORIDA IRRIGATION AND LANDSCAPING, INC.					
İ					
Principal Plac	e of Business	Mailing Address			
4116 N. FORBES RD. 4116 N. FORBES RD.					
PLANT CITY FL 33566 PLANT CITY FL 33566					
				DO NOT WRITE II	N THIS SPACE
				3. Date Incorporated or Qualified	
2 Principal P	flace of Business	2a. Mailing Address	<del> </del>	09/29/1997 4. FEI Number	T Applied For
21	1400 01 2001/1000	26		59-3469670	Applied For Not Applicable
Suite, Apt. #, etc. St		Suite, Apt. #, etc.			60.75
22		27		5. Certificate of Status Desired	Fee Required
I Lity & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25 S. Name and Address of Curr		30	Personal Property Tax due June 3  10. Name and Address of New Regi	
		ent Hegistered Agent	81 Name	10. Name and Address of New Regi	stered Agent
JUDAN, IERRI P					
4116 N. FORBES RD. PLANT CITY FL 33566			82 Street Addre	ess (P.O. Box Number is Not Acceptable	o}
PU	RNI CHT PL 33396		83		
					<del></del>
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the pur	roose of changing its registered
office or r agent. I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was au igations of Section 607.0505. Flor	uthorized by the corporati rida Statutes.	ion's board of directors. I hereby accept	the appointment as registered
SIGNATURE	Tomin DON	ulal		Sau !	8. 199V
	Signature, typod or printed name of registered a		Registered Agent signature require		6A1E
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D OWENE DODEDT W	☐ DELETE	1.1 TITLE		Change Addition
NAME	OWENS, ROBERT W		1.2 NAME		
STREET ADDRESS	4116 N. FORBES RD. PLANT CITY FL 33566		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME	JUDAH, TERRI P		2.2 NAME		- Overlie
STREET ADDRESS	4116 N. FORBES RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANT CITY FL 33566		2. 4 CITY+ST+ZłP		•
TITLE		DELETE	3 1 TITLE	·	Change Addition
NAME	•		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- ST- ZIP		☐ Change ☐ Addition
NAME		FT OFFICE	6.1 TITLE 6.2 NAME		C change C Mantion
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6.3 STREET ADDRESS		

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 on an attachment with an address.

1. .. D. Erdall

3R2E034 (10/97)

**FILED** 

Jan 21 1998 8:00am

Secretary of State