SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # V27106 (6)EXTRA TOUCH LAWN CARE AND LANDSCAPING, INC. Principal Place of Business Mailing Address 2909 DONALD ROAD 2809 DONALD ROAD LAKE WORTH FL 33461-1707 LAKE WORTH FL 33461-1707 3. Date Incorporated or Qualified 3a. Date of Last Report 04/06/1992 08/08/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied for 21 65-0330587 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zιρ Country Zıp Country 8. This corporation has liability for intangible tax under s. 199 032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FEENEY, TERRENCE S. Name 2809 DONALD ROAD R2 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33461 83 84 City Zip Code 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 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 Signature, typed or printed name of registered agent and tille if applicable (NOTE: Ringistered Agent signature required when reliestating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (36/8)TITLE DELETE 11 TITLE Change Addition FEENEY, TERRENCE S. NAME 1.2 NAME 2809 DONALD ROAD STREET ADDRESS 1 3 STREET ADDRESS LAKE WORTH FL CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition FEENEY, KATHLEEN L. NAME 22 NAME 2809 DONALD ROAD STREET ADDRESS 2 3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-71P 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 54 CITY-ST-ZIP TITLE DELETE 61 TIFLE Change Addition NAME 62 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 2IP filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 al report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if proration or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and or on an attachment with an address. 14. I do hereby certify that the information supplied with the I do hereby certify that the information indicated on this annu-further certify that the information indicated on this annu-made under oath, that I am anythicer or director of the of that my name appears in Block 12 or Block 13 if shanged SIGNATURE: 07-24-96 (407)642-0614