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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V41497

(1)

DAVES TREE SERVICE, INC. Principal Place of Business Mailing Address 1173 MANETTE CIR 1173 MANETTE CIR HOLLY HILL FL 32117 HOLLY HILL FL 32117-1823 US 3. Date Incorporated or Qualified 3a. Date of Last Report 06/05/1992 03/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 59-3128221 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Ζip Country This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 Florida Statutes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ROBERTS. DAVE 1173 MANETTE CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **HOLLY HILL FL 32117** 83 84 Zip Code 85 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 it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pented tradic of regres reliagest and otheir applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. **DPVS** DELETE Change Addition THLE 1.1 TITLE NAME ROBERTS, DAVE W 1.2 NAME CR2E034 1173 MANETTE CIRCLE STREET ADDRESS 13 STREET ADDRESS HOLLY HILL FL 1.4 CITY - ST - ZIP C:TY - ST - ZIF DELETE Change Addition THEF 21 TITLE NAVé 22 NAME STREET ADDRESS 23 STREET ADDRESS 2.4 CITY-ST-ZIP CITY - \$1 - 70P DELETE Change Addition 3.1 TITLE THE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-S1-ZIF DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHTY-ST-ZIP CHY-ST-70° DELETE 5 · TIFLE Change Addition THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHTY-ST-ZIP City - St - ZiP Addition | DELETE Change 61 THIE TELE NAMÉ 6.2 MAME

14. Lee 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 as address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

City - ST - ZiP

DAUDW. Doberts 115An97

904253640

FILED

Jan 22 1997 8:00am

Secretary of State