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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600033502 (1)

DAVID ZOOK LAWN SERVICE, INC.

Principal Place of Business Mailing Address 1040 BACON AVENUE 1040 BACON AVENUE SARASOTA FL 34232 SARASOTA FL 34232-2804 3. Date Incorporated or Qualified 3a. Date of Last Report 04/15/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 1040 BACON AVE.
Suite, Apt. #, etc. 1040 BACON 65-066355 Not Applicable Suite Apt # etc \$8.75 Additional \Box 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be SARASOTA SARASOTA Trust Fund Contribution Added to Fees Country This corporation has liability for intangible tax under s. 199.032, Florida Statutes
 Yes
 No Country 30 SARASOTA 2 25 SARASOTA 29 3423 9. Name and Address of Current Registered Agent 34232 **2**4232 Florida Statutes 10. Name and Address of New Registered Agent 81 Name TROYER, PAMELA LOOK JAUIB 7543 N. LEEWYNN DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34240 83 1040 BACON AUE. Zip Code 34232 84 City Sarasota 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DAUID ZOOK Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE ZOOK, DAVID NAME 1.2 NAME 1040 BACON AVENUE 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34232 1.4 CITY-ST-ZIP CITY - ST - ZIP ___ DELETE 2 1 7171 F ☐ Change ☐ Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - S1 - 7IP 2. 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE Addition TITLE 4.1 TITLE NAMÉ 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-2IP TITLE DELETE 6.1 TITLE Change | Addition 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS DITY-ST-ZIP 6.4 CITY-ST-ZIP

SIGNATURE:

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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.

941-377-7240

(96/6)

FILED

Feb 13 1997 8:00am

Secretary of State