FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Jun 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 275110

1. Corporation Name
Lantana Nursery & Landscape Co., Inc

Principal Place of Business
1612 S. Dixie Hwy
Lake Worth, Fl. 33460

Mailing Address
2553 S.W. 10th CT.
Boynton Beach Fl. 33426

2. Principal Place of Business	2a. Mailing Address
21 1612 S. Dixie Hwy	26 2553 S.W. 10th CT
Suite, Apt #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Lake Worth, Fl.	City & State 28 Boynton Beach, Fl
Zip 24 ~~Fl.~~ 33460 Country 25 Palm Beach	Zip 29 33426 Country 30 Palm Beach

3. Date Incorporated or Qualified: 10/25/63
3a. Date of Last Report: 5/96
4. FEI Number: 59-1025873 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
James W. Metz, Jr.
1612 S. Dixie Hwy
Lake Worth, Fl. 33460

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

CR2E034 (9/96)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/T/P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	James W. Metz, Jr.	1.2 NAME	
STREET ADDRESS	1612 S Dixie Hwy	1.3 STREET ADDRESS	
CITY-ST-ZIP	Lake Worth, Fl. 33460	1.4 CITY-ST-ZIP	
TITLE	V/D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	James W. Metz III	2.2 NAME	
STREET ADDRESS	1612 S. Dixie Hwy.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Lake Worth, Fl. 33460	2.4 CITY-ST-ZIP	
TITLE	S/D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Charlene Stimely	3.2 NAME	
STREET ADDRESS	2553 S.W. 10th CT.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Boynton Beach, Fl. 33426	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	700002209767
STREET ADDRESS		5.3 STREET ADDRESS	-06/12/97--01005--021
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***165.00
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	CS
CITY-ST-ZIP		6.4 CITY-ST-ZIP	6/5/97

14. I do 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.

SIGNATURE Charlene Stimely Secretary 4/30/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #