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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # 647353

(2)

PLANTS OF RUSKIN, INC.

Feb 12 1998 8:00am
Secretary of State

FILED

	incipal Place of Busines		Lt.	Hay Address									
901 4TH STREET N.W. P.O. BOX 994 RUSKIN FL 33570			90° P.0	Mailing Address 901 4TH STREET N.W. P.O. BOX 994 RUSKIN FL 33570			DO NOT WRITE IN THIS SPACE						
								3.	Date Incorporated or Qualified 12/06/1979				
2.	2. Principal Place of Business			2a. Mailing Address				4.	4, FEI Number		Applied For		
Suite, Apt. #, etc			26	26 Suite, Apt. #, etc.				59-1954831			Not Applicable		
			h					5. Certificate of Status Desired			\$8.75 Additional Fee Regulred		
City & State			26	City & State				6.	, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
24	Zıp	Country 25	29	·	Соц <b>30</b>	ntry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.		rent year Intangible ] Yes 🏻 No			
	g, Name	25 29 30 30 g. Name and Address of Current Registered Agent						10.	Name and Address of New Registered A	gent			
4TH STREET AND 11TH AVE, N.E.						81 82	Name Street Addi	Address (P.O. Box Number is Not Acceptable)					
RUSKIN FL 33570					83								
					}	84	City			OE .	Zin 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. 1 a	m familiar with, and accept the obligations of	Section 607.0505, F	lorida Statutes.	and the second of surviving the second of th	prino appointment as	regisioled	
SIGNATURE	Signature, typed or profest harve of regestered right and the r	(All All All All All All All All All All	TE Registered Agent signature requi		A.T.		
12. OF LICERS AND DIRECTORS			13.	DATE CERS AND DIRECTORS IN 12			
TITLE	VSD	DELETE	1.1 TITLE		☐ Change	☐ Addition	
NAME	DICKMAN, EDWARD L (ASST)		1.2 NAME				
STREET ADDRESS	12TH ST S W		1.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN, FL 00000		1.4 CITY-ST-ZIP				
TITLE	VTD	DELETE	2.1 TITLE		Change	Addition	
NAME	DICKMAN, GLEN K		2.2 NAME				
STREET ADDRESS	US HWY 41 SOUTH		2.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN, FL 00000		2.4 CITY-ST-ZIP				
TITLE	PD	DELETE	3.1 TITLE		Change	☐ Addition	
NAME	SPENCER, WILLIAM H		3.2 NAME				
STREET ADDRESS	14TH AVE S E		3.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN, FL 00000		3 4. CITY-ST-ZIP				
TITLE	\$D	DELETE	4.1 TITLE		☐ Change	Addition	
NAME	DICKMAN, PAUL R		4. 2 NAME				
STREET ADDRESS	103 12TH ST S W		4.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN, FL 00000		4 4 CITY-ST-ZIP				
TITLE	VM	☐ DELETE	5 1 TITLE		Change .	Addition	
NAME	BARRETT, RICHARD E		5 2 NAME				
STREET ADDRESS	901 4TH ST. NW		5.3 STREET ADDRESS				
CITY-ST-ZIP	RUSKIN FL		5 4 CITY-SY-ZIP				
TITLE		DELETE	6.1 TITLE		☐ Change	☐ Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY ST. 7IP			CAPITY PT 710				

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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attachment with a address.

813-645-2528