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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Jan 28 1997 8:00am

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Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 671516

(3)

WESTERN IRRIGATION AND LANDSCAPING COMPANY

Lam an officer or director of the corporation of the receive appears in Block 12 or Block 13 if changed, of on an attack

SIGNATURE:

| | e of Business | Mailing A | Address | | | TOBER DIVIN TORRE CONTROL TORRE | binsi denii Aldii dinii dinii | RIMI HIRI |
|---|--|----------------------------|--|---|--|--|----------------------------------|-----------------------------|
| 1050 E LAKE WOODLANDS PKWY PO BOX 860 PALM HARBOR FL 34682-7860 | | PO BOX I | 520 BROAD STREET PO BOX 860 NEWARK NJ 07102-3111 | | | | | |
| | | US | | | | 3. Date Incorporated or Qualified 05/28/1980 | 3a. Date of Last F 04/17/1996 | Report |
| | Race of Business | 2a. Mailir | ng Address | | | 4. FEI Number | A | pplied For |
| 21 | | 26 | | | | 59-2175986 | N | ot Applicable |
| Suite, Apt 22 | | Suite, 27 | , Apt. #, etc. | | | 5. Certificate of Status Desired | | Additional equired |
| City & Stat | te | City 8 | 3. State | | | Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| Zip | Country | Zip | | Country | / | 8. This corporation has liability for i | ···· / | |
| 24 | 25 | 29 | | 30 | | | Yes 🗌 No | |
| | Name and Address of Curr | ent Registered | Agent | | | 10. Name and Address of New Re | elstered Agent | |
| DEA | s, william J. | | | 81 | Name | | | |
| 2215 | 5 RIVER BOULEVARD | | | 82 | Street Ada | dress (P.O. Box Number is Not Acceptab | (a) | |
| JAC | KSONVILLE FL 32204 | | | | 00017.00 | | | |
| | | | | 83 | | | | |
| | | | | 84 | City | | FL 85 Zip | Code |
| TO SOITO | to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl | te of Florida. Suc | ch change was : | authorized b | v the corpore | rporation submits this statement for the p ation's board of directors. I hereby accep | urnose of changing i | ts registered registered |
| SIGNATURE | | | | | | | | |
| | Signature: 614 bibliphinted name to registence a | egent and title if applica | ion) elete | E: Registered Ag | ent signature requ | uired when reinstaling) | DATE | |
| 12. | y | ND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFIC | | RS IN 12 |
| TITLE | S | | DELETE | 1.1 TITLE | | | - Change | Addition |
| NAME | WEISS, WILLIAM E. | | | 1.2 NAME | | | | |
| STREET ADDRESS | 520 BROAD ST | | | 1.3 STREET | I ADDRESS | | | |
| CITY - ST - ZIP | NEWARK NJ | | | 1.4 CITY - 1 | ST-ZIP | | | |
| | 1 Late | | | | | | | Addition Addition |
| TITLE | VD | | DELETE | 2.1 TITLE | | | Change | Audition |
| | RYAN, MICHAEL S. | | DELETE | 2.1 TITLE 2.2 NAME | | | Change | MODIOO! |
| TITLE | RYAN, MICHAEL S. 520 BROAD ST | | DELETE | | I ADDRESS | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY - S1 - ZIP | RYAN, MICHAEL S. 520 BROAD ST NEWARK NJ | | | 2.2 NAME | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS | RYAN, MICHAEL S. 520 BROAD ST NEWARK NJ PD | | DELETE DELETE | 2.2 NAME 2.3 STREE | | | ☐ Change . ☐ Change | |
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| TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE | RYAN, MICHAEL S. 520 BROAD ST NEWARK NJ PD COMPITELLO, YVONNE M. 520 BROAD ST | | | 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE | ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S7-ZIP | RYAN, MICHAEL S. 520 BROAD ST NEWARK NJ PD COMPITELLO, YVONNE M. 520 BROAD ST NEWARK NJ | | ☐ OELETE | 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- | ST-ZIP | | | |
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| TITLE NAME STREET ADDRESS CITY-S1-7IP TITLE NAME STREET ADDRESS CITY-S2-7IP TITLE NAME | RYAN, MICHAEL S. 520 BROAD ST NEWARK NJ PD COMPITELLO, YVONNE M. 520 BROAD ST NEWARK NJ V MILLER, ARTHUR M. | N | ☐ OELETE | 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME | ST-ZIP I ADDRESS ST-ZIP | | . Change | Addition |
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Michael S. Ryan)