

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

**FILED**  
**Jan 20 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 850530 (7)**  
 1. Corporation Name  
**ROCK & WATERSCAPE SYSTEMS, INCORPORATED**



Principal Place of Business #11 WHATNEY IRVINE CA 92718	Mailing Address #11 WHATNEY IRVINE CA 92718
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/29/1981</b>	
21	22	26	27	4. FEI Number <b>95-2932231</b>	Applied For Not Applicable
22 Suite, Apt. #, etc		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24 Zip <b>92618</b>	25 Country	29 Zip <b>92618</b>	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
BARNARD, GLENN 4434 PARKWAY COMMERCE BLVD ORLANDO 32808				81	Name
				82	Street Address (P.O. Box Number Is Not Acceptable)
				83	
				84	City
				85	Zip Code
				<b>FL</b>	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<b>CHIEF EXECUTIVE OFFICER</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, DOROTHY L	1.2 NAME	
STREET ADDRESS	8 RUSHINGWIND	1.3 STREET ADDRESS	
CITY-ST-ZIP	IRVINE, CA 00000	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, JERRY L	2.2 NAME	
STREET ADDRESS	33761 SHAMROCK LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN JUAN CAPISTRANO, CA	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUARNERI, RICHARD P.	3.2 NAME	
STREET ADDRESS	28325 DRIZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	MISSION VIEJO, CA 00000	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIESZ, LANCE C	4.2 NAME	
STREET ADDRESS	22521 HILLSBORO DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAGUNA NIGUEL CA	4.4 CITY-ST-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, KAREN L.	5.2 NAME	
STREET ADDRESS	33761 SHAMROCK LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN JUAN CAPISTRANO, CA	5.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARNARD, GLENN S	6.2 NAME	
STREET ADDRESS	764 SWAYING PALM DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL	6.4 CITY-ST-ZIP	

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 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: *Richard P. Guarneri* **RECEIVED** **1-7-98** **714-770-1434**

CR2E034 (10/97)