

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

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Mar 27 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 # **F12388** (7)
1. Corporation Name
LAWN MASTER, INC.



Principal Place of Business
**3200 JOHNSON AVE.
P. O. BOX 15470
PENSACOLA FL 32514**

Mailing Address
**3200 JOHNSON AVE.
P. O. BOX 15470
PENSACOLA FL 32514-0470**

3. Date incorporated or Qualified
01/02/1981

3a. Date of Last Report
03/05/1996

4. FEI Number
59-2049647

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

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 State, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent
**WILLIAMS, JOSEPH R JR
3200 JOHNSON AVE.
PENSACOLA, FL
32514**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *Joe R Williams Jr* (NOTE: Registered Agent signature required when reinstating)
DATE **3/20/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEKLEY, KENNETH L	1.2 NAME	
STREET ADDRESS	4957 SOUNDSIDE DR	1.3 STREET ADDRESS	
CITY-STATE-ZIP	GULF BREEZE FL	1.4 CITY-STATE-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, JOSEPH R, JR	2.2 NAME	
STREET ADDRESS	1705 BAKALANE AVE	2.3 STREET ADDRESS	
CITY-STATE-ZIP	PENSACOLA, FL 00000	2.4 CITY-STATE-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEKLEY, WILLIAM R	3.2 NAME	
STREET ADDRESS	13110 THOMPSON RD	3.3 STREET ADDRESS	
CITY-STATE-ZIP	FAIRFAX VA	3.4 CITY-STATE-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, SCOTT B.	4.2 NAME	
STREET ADDRESS	7625 BROOK FOREST WAY	4.3 STREET ADDRESS	
CITY-STATE-ZIP	PENSACOLA FL	4.4 CITY-STATE-ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, JEFFREY L.	5.2 NAME	
STREET ADDRESS	750 WOODBINE DR	5.3 STREET ADDRESS	
CITY-STATE-ZIP	PENSACOLA FL	5.4 CITY-STATE-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, MARGARET E	6.2 NAME	
STREET ADDRESS	1705 BAKALANE AVE	6.3 STREET ADDRESS	
CITY-STATE-ZIP	PENSACOLA FL	6.4 CITY-STATE-ZIP	

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 is based 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: *Scott Williams* **3/20/97 (904) 476-1601**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)