PROFIT · CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

(9)

CUSTOM DESIGN, IRRIGATION & LANDSCAPING OF PINEL LAS COUNTY, INC.

Mailing Address Principal Place of Business % WILLIAM S JONASSEN % WILLIAM S JONASSEN 10758 ULMERTON RD 10758 ULMERTON RD LARGO FL 34648 LARGO FL 34648 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1981 05/01/1995 4. FLI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2181546 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zιρ Country Ζıp ☐ Yes ☐ No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) JONASSEN, WILLIAM S 82 10785 ULMERTON RD 83 **LARGO FL 34648** Zip Code 85 84 City 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 (NO) F. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE Addition ☐ Change 1 1 TITLE TITLE 1.2 NAME CREEL, CHARLES E, SR NAMÉ **7610 ULMERTON ROAD** 1.3 STREET ADDRESS STREET ADDRESS LARGO, FL 00000 14 CITY - ST - ZIP CITY - ST - ZIE Change Add-tion DELETE 2 1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP ■ Addition Change DELFTE 3 1 TITLE 711LF 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY - S1 - ZIP CiTY-ST-ZiP Addition ☐ Change DELETE 4. 1 TITLE

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 usate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name applied to the corporation or the receiver or the school of the corporation of the receiver or the school of the corporation of the corpora appears in Block 12 or Block 13 if chang

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