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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H47830

(5)

BRICKMAN MANAGEMENT COMPANY, INC.

Principal Place of Business Mailing Address						BIBN GIBN GIBN FIBN GIB	
8618 ORETO DR 8618 ORETO DR PORT RICHEY FL 34668 PORT RICHEY FL 34668			8	DO NOT INDITE IN THE ODAGE			
US US				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
					03/18/1985		
2. Principal P	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number	Δ,	oplied For
21		26			59-2512552		ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				¢0.75	Additional
22		27			5. Certificate of Status Desired	T T T T T	equired
City & Stat	е	City & State			6. Election Campaign Financing	\$5,00	May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country Zip		Count	ry	8. This corporation owes or has paid the current year Intangible		
24	25 29 30 9, Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent		
00	·	II uedietelen Wäeur	8	1 Name	10. Name and Address of New Heg	stered Agent	
	ICKMAN, ROBERT		Ľ	Hame			
8618 ORETO DR			[8	2 Street Add	reet Address (P.O. Box Number is Not Acceptable)		
PORT RICHEY FL 34668			8:	3	7 - 7 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	···········	
			8-	4 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statu	utes, the abo	<u> </u> ve-named com	poration submits this statement for the pu	rance of changing it	s registered
OTHICE OF I	egistered agent, or both, in the State im familiar with, and accept the obliga	of Fiorida. Such change was	s authorized t	by the corpora	tion's board of directors. I hereby accept	the appointment as	registered
=	in terminal with, and accept the oblige	TOUCO. TOO HOUSE OF SECURE	TOTIUM Statuti	35.			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NC	OTE Registered A	gent signature requi	red when reinsteting)	DATE	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 12
TITLE	PD	☐ DELETË	1.1 TATLE			☐ Change	Addition
NAME	BRICKMAN, ROBERT		1.2 NAME				
STREET ADDRESS	3519 PKWY BLVD		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	LAND O'LAKES FL			ST-ZIP			
TITLE	STD DELETE		2.1 TITLE			LI Change	☐ Addition
NAME	BRICKMAN, MARGARET V.		2.2 NAME				
STREET ADDRESS	3519 PKWY BLVD			ET ADDRESS			ĺ
CITY-ST-ZIP TITLE	LAND O'LAKES FL			-ST-ZIP		Change	144004
NAME		C DEFETE	3.1 TITLE			L Change	Addition
STREET ADDRESS			3.2 NAME				ľ
CITY-ST-ZIP				T ADDRESS			
TITLE		DELETE	3.4. CITY-	· 31 · ZIF		Change	Addition
NAME		<u> </u>	4. 2 NAME			Silengs	- I WULLIAM
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			
indicated (on this annual report or supplemental	l annual report is true and ac	curate and th	rat mv signatur	Section 119.07(3)(i), Florida Statutes. If ure shall have the same legal effect as if mired by Chapter 607, Florida Statutes; an	iada lindar nathi tha	tlaman I