

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H70075** (7)
1. Corporation Name
ROYAL EDGER & MOWER COMPANY, INC.

Principal Place of Business Mailing Address
1135 PASADENA AVE S S-140 **1135 PASADENA AVE S S-140**
150-2ND AVENUE N., STE 1600 **150-2ND AVENUE N., STE 1600**
ST. PETERSBURG FL 33701 **ST. PETERSBURG FL 33701**
US **US**

2. Principal Place of Business 2a. Mailing Address
21 **10831-49th Street No.** 26 **10831-49th St. No.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 **Clearwater, FL** 28 **Clearwater, FL**
Zip Country Zip Country
24 **33762** 25 29 **33762** 30

9. Name and Address of Current Registered Agent
* **ROWE, JAMES C ESO.**
EIDEN, EARLE & KIEFNER, P.A.
100 - 2ND AVE. SO., STE. 400N
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MCMILLAN, JOHN	
STREET ADDRESS	150-2ND AVE N, STE 1600	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	VST	<input type="checkbox"/> DELETE
NAME	MCMILLAN, LESA	
STREET ADDRESS	1135 PASADENA AVENUE S S-140	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	10831-49th St. No.
1.4 CITY-ST-ZIP	Clearwater, FL 33762
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	10831-49th St. No.
2.4 CITY-ST-ZIP	Clearwater, FL 33762
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	000002598250
5.4 CITY-ST-ZIP	-07/24/98--01087--044
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	000002598250
6.4 CITY-ST-ZIP	-07/24/98--01087--043

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:

[Signature]

FILED
Jul 23 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/07/1985
4. FEI Number **59-2574527** Applied For ☐ Not Applicable ☐
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

CR2E034 (5/98)

7/17/98 727-573-1700

Royal Edger & Mower Co.

PSJ

10831 - 49TH STREET NORTH
CLEARWATER, FLORIDA 34622
(813) 573-1700

July 17, 1998

Florida Department of State
Sandra B. Mortham
Secretary of State

Division of Corporations
P O Box 6327
Tallahassee, Florida 32314

RE: 1998 Annual Report

Dear Ms. Mortham,

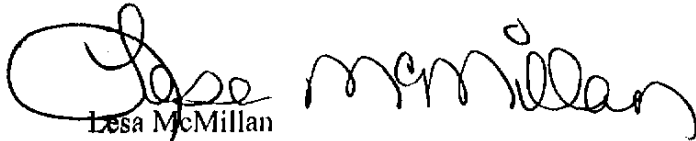
I would like to thank you in advance, for taking the time to look over the copy of our 1997 Statement of Change of Registered Office or Registered Agent or Both for Corporations enclosed.

Please note that the information on this form dated August 12, 1997 does not agree with the information on our 1998 Annual Report. Possibly there was a computer error as all of the addressing is incorrect. The Principal Place of Business has two addresses which are for the previous Agent, from two years ago. This same address is also shown as the Officers addresses.

Although, this Annual Report is stamped second notice I did not receive our first notice, possibly due to the incorrect information.

Please accept our corrections along with our check including the additional fee for Certificate of Status.

Sincerely,


Lesa McMillan
Vice-President

LMjir

Enclosures