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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90050 036 ***150.00

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DOCUMENT # H73531

BERGMANN'S LAWN SERVICE, INC.

Principal Place of Business Mailing Address							3-81- 61611 8-811	81811 61811 (881	
1212 S. DIXIE HWY LANTANA FL 33462		1212 S. DIXIE HWY Lantana FL 33462			•	DO NOT WRITE IN THIS	S SPACE		
						3. Date Incorporated or Qualifed			1
						08/29/1985			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For	1
	acc of Eddinose	26				59-2626475	N	lot Applicable	1
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75	Additional	1
<u> </u>	-	27				5. Certifcate of Status Desired	Fee R	Required	
- City. & State	9	City & State				6. Election Campaign Financing \$5.00 May Be]
3		28				Trust Fund Contribution	Added	to Fees	1=
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year In	tangible	_	
4	25	29 30	0			Personal Property Tax.	Yes	No	1
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		-
	GMANN, ROBERT WAYNE			81	Name				1
			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			1	
	S. DIXIE HWY.								4
LAN	TANA FL 33462			83					
				84	City		85 Zip	Code	1
					į	<u>Fl</u>			4
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligation	f Florida. Such change was aut	nonzed	i by ir	named corpo ne corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint	f changing it aintment as r	s registered egistered	
SIGNATURE									l
****	Signature, typed or printed name of registered agent			Agent s	signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	OPS IN 12	13
12.	OFFICERS AND	DELETE	13.	n c		ADDITIONS/CHAITGES TO OFFICERS A	Change		13
TITLE	•		1.1 NA		ļ		_ •	_	} ;
NAME	BERGMANN, ROBERT WAYNE	·			DORESS				
STREET ADDRESS	1212 SOUTH DIXIE HWY.								
CITY-ST-ZIP	LANTANA FL	☐ DELETE	2.1 TI	TY-ST-	ZIP		☐ Change	Addition	
TITLE	~		2.2 N				_ ,		
NAME	ABBOTT, TOM 1212 SOUTH DIXIE HWY.				ADDRESS .				
STREET ADDRESS	LANTANA FL			ITY-ST:	1				
CITY-6T-ZIP >	DATAMETE	☐ DELETE	3,1 TT	_	· ZIF		Change	Addition	;}=
NAME			3.2 N/		`				1
STREET ADDRESS			ł		DDRESS				Ì
				ITY-ST-					
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TI			Marin Taran	Change	Addition	1
NAME			4. 2 N	AME					
STREET ADDRESS					NDDRESS				
CITY-ST-ZIP			•	TY-ST-					1
TITLE		☐ DELETE	5.1 TI				☐ Change	Addition	1
NAME	}		5.2 N						
STREET ADDRESS			5.3 ST	TREET A	NDDRESS .				
CITY-ST-ZIP			5.4 CI	TY-ST-	ZIP			_	
TITLE		☐ DELETE	6.1 TI	TLE			Change	Addition	1
NAME			6.2 N	AME					-
STREET ADDRESS			6.3 ST	REET A	NODRESS				1
ADDINESS		^	640	TV CT	ZID				

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 tristee employered 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, with all other like employered.

SIGNATURE:

561-586-5288