FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 31 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 # **J24481** **(0)**

1. Corporation Name
CREEKSIDE LAWN SERVICE, INC.

Principal Place of Business
% KEVIN DALY
1 S.E. 1ST AVE.
GAINESVILLE FL 32601-6240

Mailing Address
C/O JOSE PEREZ
P.O. BOX 1164
ANTHONY FL 32617-1164
US

3. Date Incorporated or Qualified: **07/17/1986**
3a. Date of Last Report: **03/26/1996**

2. Principal Place of Business
21 **4315 S.W. 29th AVE.**
Suite, Apt. #, etc.
22 **GAINESVILLE, FL.**
City & State
23 **32608**
Zip
24
Country
25 **USA**

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: **59-2752390** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
DALY, KEVIN
1 S.E. 1ST AVE.
GAINESVILLE FL 32602

10. Name and Address of New Registered Agent
81 Name: **Janice Perez**
82 Street Address (P.O. Box Number is Not Acceptable): **9525 NE 38th TERR.**
83
84 City: **Anthony** **FL** 85 Zip Code: **32617**

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: Janice Perez — JANICE PEREZ — 3-25-97
Signature of new registered agent, if changing (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, JOSE	1.2 NAME	
STREET ADDRESS	9527 NE 38 COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	ANTHONY FL	1.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, JANICE	2.2 NAME	
STREET ADDRESS	9527 NE 38 COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	ANTHONY FL	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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 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: JANICE PEREZ Janice Perez — 3-25-97 — 352-629-8853
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #