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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J51764

LAWN SPRAYING BY WOODY, INC.

(5)

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- I ARBISIO DSDI BIIDE SIDII LODIO DSISI DIBI DIBII DIDII		
C/O WW WO			C/O WW WOODY SR				
354 PARKWAY DR DAYTONA BEACH FL 32114		354 PARKWAY DR DAYTONA BEACH FL 32114			DO NOT WRITE IN THIS SPACE		
					01/14/1987		
2, Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Ar	oplied For
21		26		<u>59-2777837</u>	No	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional	
22		27		g, commode of charge bearing	Fee Re	equired	
Clty & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	1 2		Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	1	8. This corporation owes or has paid the		_ ~
24	25 25 Name and Address of Current	29	30		Personal Property Tax due June 30.		_ No
WO		redistered wheur	81	Name	10. Name and Address of New Register	a Agent	
	ODY, W W SR		"	Ivallie			
354 PARKWAY			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
DAYTONA BCH FL 32114					· · · · · · · · · · · · · · · · · · ·		
			83				
			84	City		85 Zip (Code
				_	F	· L	
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statut	tes, the abov	e-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing it	s registered
agent. I an	n familiar with, and accept the obliga	tions of Section 607.0505, Fi	orida Statute	y and corpora S.	adon's board of directors, i hereby accept the a	topoliminent as	registered
SIGNATURE _							
	Signature, typed or printed name of registered ager		£: Registered Ag	ent signature requ	ired when reinstating) DATE	-	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	•	DELETE	1.1 TITLE			☐ Change	Addition
NAME	RICKARD, MARIA T.		1.2 NAME				
STREET ADDRESS	2684 JOHN ANDERSON DR		1.3 STREET	ADDRESS			
CITY-ST-ZIP	ORMOND BEACH FL		1.4 CiTY-8	ST-ZIP			
TITLE	D WOODY WHATEW OD	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	WOODY, WILLIE W. SR		2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP				
STREET ADORESS	354 PARKWAY DR.						
CITY-ST-ZIP	DAYTONA BEACH FL						
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		· <u>— </u>	4.4 CiTY - S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		DELETE	6.1 TITLE		- 	☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S	1 - ZIP			
14. I hereby ce	ertify that the information supplied wit	h this filing does not qualify to	or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information
officer or d	i rector of the corporation or the recei	ver or trustee empower ed to (curate and the execute this	at my signatu report as red	ire shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	under oath; tha at my name ans	it I am an pears in
Block 12 or	r Block 13 if changed, or on an attact	hment with an address.				- A	
		<i>H</i>					· ·