

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

FILED  
Feb 02 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J76496 1. Corporation Name Professional Lawn Services, Inc.			
Principal Place of Business 1881 Trade Center Way Naples FL 34109		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 6/5/87	
22 City & State	27 City & State	4. FEI Number 59-2790507	
23 Zip	28 Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24	25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent Marlene Warner 1881 Trade Center Way Naples FL 34109		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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.		10. Name and Address of New Registered Agent	
SIGNATURE		81 Name	
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)		82 Street Address (P.O. Box Number is Not Acceptable)	
DATE		83	
12. OFFICERS AND DIRECTORS		84 City	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		85 Zip Code	
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		FL	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY - ST - ZIP		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY - ST - ZIP		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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151.1 TITLE 151.2 NAME 151.3 STREET ADDRESS 151.4 CITY - ST - ZIP		148.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
152.1 TITLE 152.2 NAME 152.3 STREET ADDRESS 152.4 CITY - ST - ZIP		149.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
153.1 TITLE 153.2 NAME 153.3 STREET ADDRESS 153.4 CITY - ST - ZIP		150.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
154.1 TITLE 154.2 NAME 154.3 STREET ADDRESS 154.4 CITY - ST - ZIP		151.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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160.1 TITLE 160.2 NAME 160.3 STREET ADDRESS 160.4 CITY - ST - ZIP		157.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
161.1 TITLE 161.2 NAME 161.3 STREET ADDRESS 161.4 CITY - ST - ZIP		158.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition</	