## 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** #

(2)

MAJOR LANDSCAPING & DESIGN, INC.

May 07 1998 8:00am Secretary of State

**FILED** 

| Principal Place of Business Mailing Address     |  |   |                |                    |  | r seerise aren hang beien bisse siese biskt bibbt bibit bibit bibit bibit bibit |            |                           |                                |
|---|--|---|----------------|--------------------|--|---|------------|---------------------------|--------------------------------|
| 7337 WOODBRIAR COURT<br>ORLANDO FL 32635-2707   |  | 7337 WOODBRIAR COURT<br>ORLANDO FL 32835-2707 |                |                    | DO NOT WRITE IN THIS SPACE                     |   |            |                           |                                |
|   |  |   |                |                    |  | 3. Date Incorporated or Qualified   |            |                           |                                |
| <u> </u>  |  |   |                |                    |  | 06/30/1987  |            |                           |                                |
| 2. Principal F                                  | Place of Business  | 2a. Mailing Address                           |                |                    | 4. FEI Number Applied Fo                       |   |            | Applied For               |                                |
| 21  |  | 26  |                |                    |  | 59-2827299  |            |                           | Not Applicable                 |
| Suite, Apt. #, etc                              |  | Suite, Apt #, etc.                            | <u>├</u> ~~    |                    |  | 5. Certificate of Status Desired  |            |                           | Additional<br>Required         |
| City & State                                    |  | City & State                                  |                |                    | 6. Election Campaign Financing \$5.00 May Be   |   |            |                           |                                |
| 23  |  | 28  |                |                    |  | Trust Fund Contribution   |            |                           | d to Fees                      |
| Zip   | Country  | Z(p)  | Cou            | Country            |  | 8. This corporation owes or has p   | aid the cu | rrent year I              | ntangible                      |
| 24  | 25   | 29  | 30             |                    |  | Personal Property Tax due Juni  | e 30.      | X Yes                     | □No                            |
| 9, Name and Address of Current Registered Agent |  |   |                |                    |  | 10. Name and Address of New Ro  | egistered  | Agent                     |                                |
| ) TE  | ERRY, DAVID E.   |   |                | 81                 | Name   |   |            |                           |                                |
| 101 SUNNYTOWN RD.                               |  |   |                | 82                 | Street Addre                                   | ess (P.O. Box Number is Not Accepta   | ble)       |                           |                                |
| SUITE 300                                       |  |   |                |                    | ou out ridare                                  | 730 (1.0. Box Hamber is Not Accepta   | Did)       |                           |                                |
| CASSELBERRY FL 32707                            |  |   |                | 63                 |  |   |            |                           |                                |
| ļ   |  |   |                | 84                 | Cit.   |   |            | II                        |                                |
| l   |  |   |                | 54                 | City   |   | FL         | <b>65</b> Zip             | Code                           |
| Unice or i                                      | to the provisions of Sections 607.0<br>registered agent, or both, in the Sta<br>im familiar with, and accept the obj | ne di Fionda, Such Chande was                 | : aumorizo     | ด กง               | z ine cornoratio                               | oration submits this statement for the pon's board of directors. I hereby acce  | DUEDODO O  | f changing<br>pointment a | its registered<br>s registered |
| SIGNATURE                                       | Signature, typed or printed name of registered   | norm and title dans scalable (Nati            | III Ferristere | d Ane              | ant signature require                          | d when renetative   | DATE       |                           |                                |
| 12.   |  | AND DIRECTORS                                 | 13.            |                    | and Digital or require.                        | ADDITIONS/CHANGES TO OFFI   |            | DIRECTO                   | IRS IN 12                      |
| TITLE   |  |   |                | TLE                |  |   |            | Change                    |                                |
| NAME  | RICHARDS, MICHAEL RUSSEL   |   | 12 N/          | 12 NAME            |  |   |            |                           | _                              |
| STREET ADDRESS                                  | 7337 WOODBRIAR CT  |   | 1351           | 13 STREET ADDRESS  |  |   |            |                           |                                |
| CATY-ST-ZIP                                     | ORLANDO FL   |   | 14 C           | IY-S               | T-ZIP  |   |            |                           |                                |
| TITLE   |  |   |                | 2 1 TOLE           |  |   |            | Change                    | Addition                       |
| NAME  | RICHARDS, STEVEN PAUL  | TEVEN PAUL 22                                 |                | 2.2 NAME           |  |   |            |                           | _                              |
| STREET ADDRESS                                  | 7333 WOODKNOT  | MAIAT   |                | 2 3 STREET ADDRESS |  |   |            |                           |                                |
| CITY-SI-ZIP                                     | ORLANDO FL   |   | P              | 2 4 CITY-ST-ZIP    |  |   |            |                           |                                |
| TITLE   |  |   |                | 1 TITLE            |  |   |            | Change                    | Addition                       |
| NAME  |  |   | 3.2 NA         | ME                 |  |   |            |                           |                                |
| STREET ADDRESS                                  |  |   |                |                    | ADDRESS  |   |            |                           |                                |
| CITY-ST-ZIP                                     |  |   | 1 -            |                    | ST-ZIP   |   |            |                           | -                              |
| TITLE   |  | DELFTE  | 41 Til         |                    | <u>" *"                                   </u> |   |            | Change                    | Addition                       |

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 roport 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 conjugation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

4.3 STREET ADDRESS

5 3 STREET ADDRESS

63 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CHY-SE-ZIP

5.1 TITLE

61 TITLE

62 NAME

DELETE

DELETE

**STREET ADDRESS** 

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

MALAE STREET ADDRESS

407 291-1387

Change

Addition

Addition