FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOC	JMĿ	NΙ	#

DOCUN 1. Corporation	Name	LEUZ	59	(7)						
BEN'	S LAWN	SERVICE, INC.							 	
Principal Place	of Business		 Ma	Riling Arkfress						
% MARY ELLEN MCKIBBIN 4824 BRADENTON ROAD SARASOTA FL 34234		% MARY ELLEN MCKIBBIN 4824 BRADENTON ROAD								
OHINOCIA	112 04204			SARASOTA FL 3423	7			3. Date Incorporated or Qualified	3a. Date of Last F	•
2. Principal Pla	ace of Busine		2a.	Mailing Address				10/24/1989 4. FEI Number	05/01/1	Applied For
21			26					65-0111749		Not Applicable
Suite, Ant. a	#, etc.		27	Suite, Apt. #, etc				5. Certificate of Status Desired		5 Additional Required
City & State	?		28	City & State				Election Campaign Financing Trust Fund Contribution	1 1	00 May Be ed to Fees
Zφ		Country	···	Zip	C	ountry		8. This corporation has liability for	intangible tax under s	
24		25	29	land Appel	30				□ No	
	9. Name	and Address of Curre	ent Hegis	tereo Agent		81	Name	10. Name and Address of New F	legistered Agent	PP 7544 ** ** *** *** *** *** *** *** *** **
MOVID	IDIN MADV	/CI I EN								
	ibin, mary Bradento					82	Street Add	ress (P.O. Box Number is Not Acceptat.	ilo)	
	SOTA FL 3					83				
0,40,0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.20 /				84	City		—. 85 Z	ip Code
									FL	
or registere	ed agent, or	ons of Sections E07.050 both, in the State of Flo of the obligations of, So	rida Such	i change was authori,	zed by the	oove r e corps	iamed corpo oration's boa	ration submits this statement for the pur ird of directors. Thereby accept the app	pose of changing its pintment as registere	registered office diagent. I am
SIGNATURE .	ر جارجات ہے۔									
12.	Signatine, typed o	or protect name of registers 1 apr OFFICERS AF			.HE Bayele		tisig afters region	ADDITIONS/CHANGES TO OFF	DATE	ODS IN 10
TITLE	D			DELETE		TIFLE		747511616761741666176		Addition
NAME	_	BBIN, BENJAMIN J S	R		1.2	NAME				
STREET ADDRESS		BRADENTON RD			1.3	STREFT	ADDRESS			
CITY-ST-ZIP	SARAS	SOTA FL			1.4	C IY-S	1 - Z-P			
TITLE	D			☐ DELETE		TITLE			☐ Change	Addition
NAME		BBIN, MARY ELLEN				NAME				
STREET ADDRESS CITY-ST-ZIP		BRADENTON RD					ADDRESS			
TITLE	SAHA	SOTA FL		DELETE		CHY-S	1-2IP		Change	Addition
NAME						NAME			டு வளிச	
STREET ADDRESS	1						ADDRESS			
City-St-Zip						C-TY S				
THILE				DELETE	4.	TITLE			Change	Addition
NAME					4 2	NAM:				
STREET ADDRESS					4.3	STREET	ADDRESS			
CITY - ST - ZIP				Filotota		C-TY-S	T - ZIP			El Liver
TITLE				☐ DELETE		THE			Change	Addition
NAME STREET ADDRESS						NAME	ACODE: S.E.			
CITY-ST-ZIP						CITY-S	ADDRESS			
TITLE				DELETE		LHY-S LTITLE	I - ZIT		Change	Addition
NAME						NAME				
STHEET ADDRESS							ADDRESS			
CITY-SI-ZIF					€ 4	CITY - S	1 - ZIP			
14. I do hereb	y certify that	the information supplied	f with this	filing is voluntarily furi	nished an	d does	s not qualify I	for the exemption stated in Section 119, atc. and that my signature shall have the	07(3)(k), Florida Statu	ites. I further

oath, that I am an officer or director of the corporation or the receiver or trustee emprishered 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 attachmost with an andress. The MARYELLEN MCKIBBIN 4/16/16 941-355-06 25

SIGNATURE: 7 Nacylles SIGNATURE HO TYPED OR PR

CR2E034 (12/95)