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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L27400

(5)

HORTICARE LANDSCAPE, INC.

FILED
Apr 25 1997 8:00am
Secretary of State

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Principal Prace of Business Mailing Address					1 10011011 010 (1011 15011 01011 50111 01011 01011 01011 01011 01011 01011 01011 01011 01011		
B28 ANCHOR RODE DR. NAPLES FL 33940 828 ANCHOR RODE DR. NAPLES FL 34103-2739							
impleo pe sos IS	740	US					
					3. Date Incorporated or Qualified		
				11/03/1989	05/01/1996		
2. Principal Flace of Business 28. Mailing Address					4. FEI Number	Applied For	
26					65-0156245	Not Applicat	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22					6. Election Campaign Financing		
3]		28			Trust Fund Contribution	\$5.00 May Be Added to Fees	
	13.27.39 Country	Zip	Count	У	8. This corporation has liability to	r intangible tax under s. 199.032,	
Zip 34 103-2739 Country 2ip 2ip 3						Yes 🗌 IVo	
	9. Name and Address of C	Current Registered Agent			10. Name and Address of New F	egistered Agent	
	row, P. Clarence		8	l Name			
) tamiami trajl north		8	Street Add	dress (P.O. Box Number is Not Accept	able)	
SUITE 215			_ إ_	<u>.</u>			
NAP	LES FL 33940		8	3			
			B	1 City		35 Zip Code	
					poration submits this statement for the ation's board of directors. I hereby acc		
SIGNATURE		RS AND DIRECTORS	13.		itred when reinstating] ADDITIONS/CHANGES TO OFF		
T ILE	PVP	☐ DELETE	1.1 TITLE			Change Additi	
IAME	JOHNSON, GREGORY B.		1.2 NAM			i	
TREET ADDRESS	6055 26TH AVE SW NAPLES FL			ET ADDRESS			
)[[V - S1 - 7]P	T	DELETE	1.4 CITY 2.1 TITLE			☐ Change ☐ Additi	
IAME	KNAPP, BETTE J		2.2 NAM	1		E. J. Similer	
STREET ADDRESS	3155 66TH ST. SW			T ADDRESS	1.		
City - \$1 - ZiP	NAPLES FL		2.4 CITY				
THE	8	☐ DELETE	3.1 TITLE			Change Addition	
AME	HULL, ROBERT R		3.2 NAM				
TREET ADDRESS	3155 66TH ST SW		3.3 STRE	ET ADDRESS			
DITY - ST - ZIP	NAPLES FL	DELETE	3.4. CITY			[][6	
TILE		DELETE	4.1 TITLE	i		Change Additi	
NAME Street adébress			4. 2 NAM	ET ADDRESS			
STRUET ALEMESS STY- ST-ZIP			4.4 CITY	1			
1111 - 21 - 21F 1111 F		☐ DELETE	5.1 TiTLE			Change Additi	
AME			5.2 NAM			•	
HREET ANDRESS			1	ET ADDRESS			
			5.3 5 Int	EL MODIFESS			
NTY SI-7-P			5.4 CiTY				
		DELETE		ST-ZIP		Change Addition	
DITY ST-Z-P HILLE NAME		DELETE	5.4 City	ST-ZIP		Change Additi	
liff F		DELETE	5.4 CITY 61 TITLE 62 NAMI	ST-ZIP		Change Additi	

a continuous continuous training the sum of 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 eath; 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: