

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PH 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L53018 (2)

1. Corporation Name

PREMIER LANDSCAPE SERVICES INC.

Principal Place of Business

7606 DAETWYLER DR
ORLANDO FL 32812
US

Mailing Address

P.O. BOX 720596
ORLANDO FL 32872
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/21/1990

3a. Date of Last Report

05/13/1994

4. FEI Number

59-2994294

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GENTILE, MICHAEL J.
7606 DAETWYLER DR
ORLANDO FL 32812

10. Name and Address of New Registered Agent

81

Name

GENTILE, MICHAEL J.

82

Street Address (P.O. Box Number is Not Acceptable)

3703 PEACE PIPE DR.

83

84

City

ORL.

FL

85

Zip Code

32829

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.

SIGNATURE

Michael J. Gentile

MICHAEL J. GENTILE PRES.

4/24/95

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PTD
GENTILE, MATTHEW C.
7606 DAETWYLER DR
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VSD
GENTILE, MICHAEL J.
3703 PEACE PIPE DR
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VD
GENTILE, STEPHEN A.
7606 DAETWYLER DR
ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE
1. 2 NAME
1. 3 STREET ADDRESS
1. 4 CITY - ST - ZIP

DELETE

2. 1 TITLE
2. 2 NAME
2. 3 STREET ADDRESS
2. 4 CITY - ST - ZIP

PTD
GENTILE, MICHAEL J.
3703 PEACE PIPE DR.
ORL., FL. 32829

3. 1 TITLE
3. 2 NAME
3. 3 STREET ADDRESS
3. 4 CITY - ST - ZIP

VSD
GENTILE, STEPHEN A.
7606 DAETWYLER DR.
ORL., FL. 32812

4. 1 TITLE
4. 2 NAME
4. 3 STREET ADDRESS
4. 4 CITY - ST - ZIP

5. 1 TITLE
5. 2 NAME
5. 3 STREET ADDRESS
5. 4 CITY - ST - ZIP

6. 1 TITLE
6. 2 NAME
6. 3 STREET ADDRESS
6. 4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), 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 oath; 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:

Michael J. Gentile

MICHAEL J. GENTILE PRES.

4/24/95

(401) 381-3595

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number