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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Modham Scoretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

DOCUMENT #

L72871

CREATIVE DESIGN LANDSCAPING INC., OF PERRY, FLOR IDA

Principal Place of Business Mailing Address 204 W OAK ST 204 W OAK ST PERRY FL 32347 PERRY FL 32347 3. Date Incorporated or Qualified 3a. Date of Last Report 05/09/1990 05/10/1995 2. Principal Place of Business 2a. Maling Address 4. FEI Number Applied For 21 59-3030841 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 Trust Fund Contribution 28 Added to Fees Zφ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 SLAUGHTER JR. JAMES N. 82 204 W OAK ST 83 PERRY FL 32347 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature byte Lei print a numer change to estimate that the Capple also DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1. 1 III. F Change Addition SLAUGHTER, JAMES N JR NAME 1.2 NAME 204 W OAK ST STREET ADDRESS 1.3 STREET ADDRESS PERRY FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELFTE TITLE 2 1 HILE ☐ Change Addition SLAUGHTER, JAMES BRETT NAME 2.2 NAME STREET ADDRESS 204 W OAK ST 2.3 STREET ADDRESS PERRY FL CHTY-ST-ZIP 2.4 CITY ST ZIP TITLE DELETE 3 1 DILE Change Addition SLAUGHTER, JOHN KEVIN 3.2 NAME 204 W OAK ST STREET ADDRESS 3.3 STREET ADDRESS PERRY FL Cily-St-2iP 3.4 CITY-ST - Z:P DELETE TITLE Change 4 1 117LE Addition SLAUGHTER, LUAN F NAME 4.2 NAME 204 W OAK ST STREET ADDRESS 4.3 STREET ADDRESS PERRY FL CITY-ST-ZIP 4.4 CITY-ST ZIP DELETE TITLE 5 1 T.D.E. Change Addition NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY - ST - ZIP DELETE Addition TITLE 6 1 TiTLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIF 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 119.07(3)(k). 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

SIGNATURE:

appears in Block 12 or Block 13 if

NING OFFICER OR DIRECTOR

72/2/2 CR2E034