

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra H. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L73717** (5)
1. Name of Corporation
GOLDEN GATE LAWNMOWER SALES & SERVICES INC.



2. Principal Office Address
**4017 23RD AVENUE S.W.
NAPLES FL 33999**

3. Mailing Address
**4017 23RD AVENUE S.W.
NAPLES FL 33999**

4. Principal Office Phone Number
21. **(813) 441-1111**
22. **(813) 441-1111**
23. **(813) 441-1111**
24. **(813) 441-1111**
25. **(813) 441-1111**
26. **(813) 441-1111**
27. **(813) 441-1111**
28. **(813) 441-1111**
29. **(813) 441-1111**
30. **(813) 441-1111**

9. Name and Address of Current Registered Agent

**LANGFORD, GEORGE P.
3357 TAMiami TRAIL NORTH
NAPLES FL 33940**

81. Name
82. Street Address (P.O. Box Number is Not Applicable)
83.
84. City
85. Zip Code
FL

3. Date Incorporated or Qualified
05/14/1990
3a. Date of Last Report
01/17/1995
4. FEIN Number
65-0192472
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. Does Corporation Liability for Intangible Tax under S. 199.02, Florida Statutes ☐ Yes ☒ No
10. Name and Address of New Registered Agent

11. I, the undersigned, the person named in Section 199.02(2)(a) of the Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the new address 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 hereby authorized to receive notices of service of process on behalf of the corporation.

12. OFFICERS AND DIRECTORS
D ☐ DELETED
SCROGGINS, LARRY D.
1136 HIGHLANDS DRIVE
NAPLES FL
D ☐ DELETED
SCROGGINS, PEARL B.
1136 HIGHLANDS DRIVE
NAPLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. NAME ☐ Change ☐ Addition
2. NAME ☐ Change ☐ Addition
3. NAME ☐ Change ☐ Addition
4. NAME ☐ Change ☐ Addition
5. NAME ☐ Change ☐ Addition
6. NAME ☐ Change ☐ Addition
7. NAME ☐ Change ☐ Addition
8. NAME ☐ Change ☐ Addition
9. NAME ☐ Change ☐ Addition
10. NAME ☐ Change ☐ Addition
11. NAME ☐ Change ☐ Addition
12. NAME ☐ Change ☐ Addition
13. NAME ☐ Change ☐ Addition
14. NAME ☐ Change ☐ Addition
15. NAME ☐ Change ☐ Addition
16. NAME ☐ Change ☐ Addition
17. NAME ☐ Change ☐ Addition
18. NAME ☐ Change ☐ Addition
19. NAME ☐ Change ☐ Addition
20. NAME ☐ Change ☐ Addition
21. NAME ☐ Change ☐ Addition
22. NAME ☐ Change ☐ Addition
23. NAME ☐ Change ☐ Addition
24. NAME ☐ Change ☐ Addition
25. NAME ☐ Change ☐ Addition
26. NAME ☐ Change ☐ Addition
27. NAME ☐ Change ☐ Addition
28. NAME ☐ Change ☐ Addition
29. NAME ☐ Change ☐ Addition
30. NAME ☐ Change ☐ Addition

14. I, the undersigned, the person named in Section 199.02(2)(a) of the Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the new address 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 hereby authorized to receive notices of service of process on behalf of the corporation.

SIGNATURE: *Pearl B. Scroggins* PEARL B. SCROGGINS 1-15-96 941-455-2281
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

CR2E034 (12/95)