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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L85255

(2)

FLORIDA FOLIAGE SERVICE, INC.

FLUHIVA	TOLIAGE SERVICE, INC.						
Principal Place	e of Business	Mailing Address				i Bubuk bubu bubu bibu bibu bibu	# ## ####
C/O LYNNE J. KITCHEN 2728B JUNIOR AVE APOPKA FL 32712		RT 1 BOX 250G 2728B JUNIOR AVE OMAHA TE 75571-9755			vas sporovar aurainan airea ar san		
		US			3. Date Incorporated or Qualified 06/22/1990	3a. Date of Last Re 07/02/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	plied For
Suite Ant	savapipene of	Suite, Apt. #, etc.			59-3031111		t Applicable
22 Apopk	Sandpiper 51. ca, Florida	27			5. Certificate of Status Desired	Fee Re	quired
23 City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip	Country	Zip	Count	ry	8. This corporation has liability for		199.032,
24 3271		29	30			Yes No	
	9. Name and Address of Current	Hegistered Agent		1 Name	10. Name and Address of New Ro	igistered Agent	
	HEN, LESLIE A		[]	1 Martic			
	' Bavon dr Tona 32725	82 Street Add		ess (P.O. Box Number is Not Accepta	ble)		
OLL	TOTAL DEVELO		8	3			
				4 City	***************************************	FL 85 Zip C	Code
11. Pursuant t	o the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the aho	Ve-named corn	poration submits this statement for the		s registered
office or re agent ar	egistered agent, or both, in the State o m familiar with, and accept the obligat	f Florida Such change was a ons of, Section 607.0505, Flo	authorized orida Statu	by the corporat es.	ion's board of directors. I hereby acce	pt the appointment as	registered
SIGNATURE	Signature, typed or protect name of registered agent	and little if applicable (NOTI	E: Registered	gent signature requir	red when reinstaling)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		S IN 12
TILLE	PD	DELETE	1.1 ไปไ			Change	Addition
NAME	KITCHEN, LARRY B.		1.2 NAM	E			1
STREET ADDRESS	RT 1 BOX 250G		1.3 STRE	ET ADDRESS			1
CITY-ST-ZIP	OMAHA TE			-ST-ZIP	·····	·····	
HILE		DELETE	2.1 TITU			Change	Addition
NAME			2.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-S1-ZIP TITLE		DELETE	2. 4 CIT 3.1 TITL	(-ST-ZIP		Change	Addition
NAME		C. Pottere	3.2 NAM				LJ riscition
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				7-ST-ZIP			
TITLE		DELETE	4.1 TITL			☐ Change	Addition
NAME			4. 2 NAM	AE .			
STREET ADDRESS			4.3 \$TR	ET ADDRESS			
CITY - ST - ZIP			4.4 CITY	- ST - ZIP			
TITLE		☐ DELETE	5.1 TITL			Change	Addition
NAME			5.2 NAN	E			
STREET ADDRESS			5.3 STRI	ET ADDRESS		2	
CITY-ST-ZIP		T Tacker		-\$1 · ZIP		——————————————————————————————————————	
TITLE		☐ D€LETE	61 TITL			L Change	Addition
NAME			6 2 NAM				
STREET ADDRESS			4	ET AODRESS			ļ
City-St-ZiP	by certify that the information supplied	with this filing does not qualit		-St-ZIP vernation states	d in Section 119.07(3)(i), Florida Statute	es. I further pertify that	the
. informatio	o indicated on this annual conoct or au	nnlamantal annual ropart is t	rite and ar	curate and that	t my signature shall have the same leg rt as required by Chapter 607, Florida	ial offant as if marks uni	der eath: that I

SIGNATURE: Jam B Kitchen LARRY B. Kitchen 1/27/97 800-633-831