

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L96210** (4)
1. Corporation Name
STRICTLY-NEAT LAWN AND YARD MAINTENANCE, INC.



Principal Place of Business
**3291 SW 3RD ST.
DEERFIELD BEACH FL 33442
US**

Mailing Address
**395 N.W. 23RD STREET
BOCA RATON FL 33431
US**

3. Date Incorporated or Qualified
07/30/1990

3a. Date of Last Report
08/11/1995

4. FEI Number
65-0210117

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
21 395 NW 23RD STREET
Suite, Apt. #, etc.
22
City & State
23 BOCA RATON, FL.
Zip
24 33431 Country
25 USA

2a. Mailing Address
26 395 NW 23RD STREET
Suite, Apt. #, etc.
27
City & State
28 BOCA RATON, FL.
Zip
29 33431 Country
30 USA

9. Name and Address of Current Registered Agent

**HURLEY, DARLENE
395 N.W. 23RD STREET
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

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

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

Signature typed or printed name of Signer (Typed Name)

Date of Registration Agent Signature (Typed Name)

Date

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	MORGAN, GREGORY	
STREET ADDRESS	3291 S.W. 3RD ST.	
CITY-ST-ZIP	DEERFIELD BEACH FL	
TITLE	DVST	☐ DELETE
NAME	HURLEY, DARLENE	
STREET ADDRESS	395 N.W. 23RD STREET	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☒ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	395 NW 23RD ST.
14 CITY-ST-ZIP	BOCA RATON, FL 33431
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/96

(561) 393-5080
(454) 48

CR2E034 (12/95)