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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # M86589

1. Corporation Name

86589

(2)

GANDY'S NURSERY & LANDSCAPING, INC.

Principal Place of Business Mailing Address					r indresit int inite milit must inte inte	BIBII OIBII BIBII BIBII BIBII BIBII IBBI
P.O. BOX 507 P.O. BOX 507 GONZALEZ FL 32560-0507			07			
					3. Date Incorporated or Qualified 06/22/1988	3a. Date of Last Report 04/30/1996
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2899787	Not Applicable
Տե Ie, Apt + 22		Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	The second secon	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	У	8. This corporation has liability for i	
24	25	29	30			Yes No
0411	9. Name and Address of Curr	ent Hegistered Agent	81	I Name	10. Name and Address of New Re-	gistered Agent
	DY, MARGARET L.			Maine		
301 E. TEN MILE ROAD PENSACOLA FL 32534			82		dress (P.O. Box Number is Not Acceptab	(6)
			83	'		
			84	City		FL 85 Zip Code
Office or re	or the provisions of Sections 607.05 egistered agent, or both, in the Sta in familiar with, and accept the obli	ite of Elorida. Such change wa	is authorized h	ov the cornor	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE .	·	· · · · · · · · · · · · · · · · · · ·			WALLEST TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE	
12.	Superiors represent printed name of registered a OFFICE DO A	ND DIRECTORS	ΟΤΕ: Registered Ας	tent signature requ	uired when reinstating)	DATE
10.1	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	GANDY, MARGARET L.	bond the second	1.2 NAME			Li orango Li radinor
STREET ADDRESS	301 E. TEN MILE ROAD			T ADORESS		
CITA - 21 - 41b	PENSACOLA FL 32534		1.4 CITY-			
701.6	S	DELETE	2.1 TITLE			Change Addition
NAME	BENNETT, ALICE M.		2.2 NAME			•
STREET ADDRESS	301 E. TEN MILE ROAD		2.3 STREE	T ADORESS		
City - St - ZiP	PENSACOLA FL 32534		2. 4 CITY-	-ST-2IP		
TITLE	P	DELETE	3.1 TITLE			Change Addition
NAM:	GANDY, TROY S		3.2 NAME			
STREET ADDRESS	311 E TERR MILE RD		3.3 STREE	T ADDRESS		
CHY ST-70°	PENSACOLA FL		3.4 CITY-	-ST-ZIP		
THE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME	:		
SPREEL ADDRESS			4.3 STREE	ET ADDRESS		
CITY - ST - Ziét		T an ere	4.4 CITY -	· · · · · · · · · · · · · · · · · · ·		
10,6		DELETE	5.1 TITLE			L. Change L. Addition
HAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CHY-\$1-74P		DELETE	5.4 CITY-			Channe M. C.
10.E			6.1 TITLE			Change Addition
NAME CARLET ASSESSED OF			6.2 NAME			
STAFFE ACTORESS				T ADDRESS		
	ev certify that the information suppl	ed with this filma does not ou	6.4 CITY-	emption state	ed in Section 119.07(3)(i), Florida Statute	s I further certify that the
mlomation	n indicated on this annual report of	r supplemental annual report is	s true and acc	curate and the	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as if made under path: that l
. 5.00 - 60 - 67	enseror or are compensation		TITELDIG IO BAD	name true tob	and the residence of control of the long of	www.vo.unannanny ngino

St Alice M. Grane H 4-24-97 474-9096