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

CORPORATION ANNUAL REPORT



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

1996

M96548

,	MENT # M965 NG SOIL AND TREE SER	•	-,					
incipal Place	of Business	Mailing Address	# 15 # 2.000 100.00 100 100 100 100 100 100 100			BAN KENI BURUK BIT	III OTOIT BABA	ELEN CIBN (EQ)
619 STATE RD. 50 GROVELAND FL 34736 US		619 STATE RD. 50 GROVELAND FL 34736						
us		US			3. Date Incorporated or Qualified 08/30/1988	, .	e of Last R	•
	ace of Business	2a. Mailing Addres	38		4. FEI Number			Applied For
Suite Apt.	#, etc.	26 Suite, Apt. #, e	etc.		59-2922491 5. Certificate of Status Desired			Not Applicable Additional
City & State	·	City & State			6. Election Campaign Financing			Required
		28			Trust Fund Contribution		-	0 May Be d to Fees
Zφ	Country 25	Zip 29	30 Co	untry	8. This corporation has liability for Florida Statutes		ax under s	199.032,
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Cur				10. Name and Address of New		Agent	
				81 Name				
	VILLIAM N. DILLARD STREET			82 Street Addr	ress (P.O. Box Number is Not Accept	table)		
	GARDEN FL 32787			83				
**********	WINDERT L OZIO			84 City				
				84 City		FL	.	ip Code
l. Pursuant to or register	o the provisions of Sections 607.0 ed agent, or both, in the State of F	502 and 607.1508, Florida Jorida, Such change was a	Statutes, the ab	l l ove-named corpor corporation's boar	ration submits this statement for the p	ourpose of ch	anging its i s registered	registered onk
or registen familiar wit GNATURE	of the provisions of Sections 607.0 ed agent, or both, in the State of Fig., and accept the obligations of, S	llorida. Such change was at Section 607.0505, Florida St	uthorized by the tatules	Dive-named corpor corporation's boar deport signature required	rd of directors. I hereby accept the ap	ourpose of ch opointment as	anging its s registered	d agent. I am
or register familiar wit	ed agent, or both, in the State of Fith, and accept the obligations of, S Source, the for protections of residuesta OFFICERS	lorida. Such change was at section 607.0505, Florida St agent and tide if applicable AND DIRECTORS	official by the fatures (NOTE: Registers 13.	corporation's boar	rd of directors. I hereby accept the ap	opointment as DATE FFICERS AND	o DIRECTO	d agent. I am DRS IN 12
or register familiar wit GNATURE	ed agent, or both, in the State of Fith, and accept the obligations of, S Square, type for protect name of registrated a OF FICERS	forida. Such change was as section 607.0505, Florida St agent and trib it applicable	(NOTE Registers 13.	corporation's board Agent signature require	rd of directors. Thereby accept the ap	opointment as DATE FFICERS AND	s registered	d agent. I am ORS IN 12
or register familiar wit GNATURE 	ed agent, or both, in the State of Fith, and accept the obligations of Signature, by the protection of repulsed a OFFICERS PD HILLARY, DENNIS W.	lorida. Such change was at section 607.0505, Florida St agent and tide if applicable AND DIRECTORS	(NOTE Registers 13. 1.1	Corporation's boar d Agent signature require TITLE	rd of directors. Thereby accept the ap	opointment as DATE FFICERS AND	o DIRECTO	d agent. I am ORS IN 12
or register familiar wit GNATURE - - - - - - - - - - - - - - - - - - -	ed agent, or both, in the State of Fith, and accept the obligations of, S Square, type for protect name of registrated a OF FICERS	lorida. Such change was at section 607.0505, Florida St agent and tide if applicable AND DIRECTORS	(NOTE Registers (NOTE Registers 13. 1.1 1.2)	corporation's board Agent signature require	rd of directors. Thereby accept the ap	opointment as DATE FFICERS AND	o DIRECTO	d agent. I am DRS IN 12
or register familiar wit GNATURE F AE EEL ADDRESS (-ST-ZIP	ed agent, or both, in the State of Fith, and accept the obligations of, S Squark, by the protect resolution of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD	lorida. Such change was at section 607.0505, Florida St agent and tide if applicable AND DIRECTORS	(NOTE Regulate 13.	d Agent signature required TITLE IAME STREET ADDRESS SITY - ST - ZIP	rd of directors. Thereby accept the ap	DATE FFICERS AND	o DIRECTO	DRS IN 12
or register familiar wit SNATURE F AE EEL ADDRESS (* ST-ZIP E	ed agent, or both, in the State of Fith, and accept the obligations of, S Squark, Special representation of representation OFFICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN	Tonda. Such change was ausection 607.0505, Florida Stagest and the It aust able. AND DIRECTORS ☐ DELET	(NOTE Registation 13. 1.1 1.2 1.3 1.4 (E	d Agent signature required TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME	rd of directors. Thereby accept the ap	DATE FFICERS AND	DIRECTO	DRS IN 12
or register familiar wit snATUFE F #E #E #E #E #ADDR:SS (-SI-7IP I #E #E ADDR:SS	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Tonda. Such change was ausection 607.0505, Florida Stagest and the It aust able. AND DIRECTORS ☐ DELET	(NOTE Registers) (NOTE Registers) 13. 14. 1.2 1.35 1.46 2.1 2.21 2.55	d Agont signature required TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS	rd of directors. Thereby accept the ap	DATE FFICERS AND	DIRECTO	DRS IN 12
or register familiar wit SNATURE 45 45 46 46 47 47 47 48 48 49 49 49 49 49 49 49 49 49 49 49 49 49	ed agent, or both, in the State of Fith, and accept the obligations of, S Squark, Special representation of representation OFFICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN	Tonda. Such change was ausection 607.0505, Florida Stagest and the It aust able. AND DIRECTORS ☐ DELET	(NOTE Registers 13. 1.1 1.2 1.3 1.4 (E 2.1 2.2 2.3 2.4 (e 2.4 (e	d Agent signature required TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME	rd of directors. Thereby accept the ap	DATE FRICERS AND	DIRECTO	d agent. I am ORS IN 12
or register familiar wit GNATURE JEEL ADDRESS V-ST-ZIP JEEL ADDRESS V-ST-ZIP JEEL ADDRESS V-ST-ZIP	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Torida. Such change was at Section 607.0505, Florida Stagestand the Itagestate AND DIRECTORS □ DELET	(NOTE Registers) (NOTE Registers) 13. 14. 1.2 1.35 1.4. 2.1 2.2 2.55 2.4. (IE 3.1)	d Agont signature required TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP	rd of directors. Thereby accept the ap	DATE FRICERS AND	D DIRECTO Change	DRS IN 12 Addition
or register familiar wit GNATURE 	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Torida. Such change was at Section 607.0505, Florida Stagestand the Itagestate AND DIRECTORS □ DELET	(NOTE Registers 13. 13. 14. 14. 14. 14. 15. 14. 15.	d Agont signature required TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE	rd of directors. Thereby accept the ap	DATE FRICERS AND	D DIRECTO Change	DRS IN 12 Addition
or register familiar wit GNATURE JEFF ME JEFF ADDRESS Y-ST-ZIP	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Iorida, Such change was at section 607,0505, Florida Stage and the Itage Lake AND DIRECTORS	(NOTE Registers) (NOTE Registers) 13. 14. 1.2 1.35 1.4(2.1 2.2) 2.55 2.4(15. 16. 17. 18. 18. 18. 18. 18. 18. 18	d Agont signature required TITLE IAME STREET ADDRESS STY-ST-ZIP TITLE IAME STREET ADDRESS STY-ST-ZIP TITLE IAME STREET ADDRESS STY-ST-ZIP	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change	DRS IN 12 Addition Addition
or register familiar wit gnature	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Torida. Such change was at Section 607.0505, Florida Stagestand the Itagestate AND DIRECTORS □ DELET	(NOTE Registers 13. It	d Agont signature required TITLE IAME ISTREET ADDRESS CITY - ST - ZIP TITLE IAME IA	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change	DRS IN 12 Addition Addition
or register familiar wit GNATURE	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Iorida, Such change was at section 607,0505, Florida Stage and the Itage Lake AND DIRECTORS	(NOTE Registers 13. 13. 14. 13. 14.	d Agont signature required TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME IAME IAME IAME	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change	DRS IN 12 Addition Addition
or register familiar wit spanture	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Iorida, Such change was at section 607,0505, Florida Stage and the Itage Lake AND DIRECTORS	(NOTE Registers 13. 13. 14. 13. 14. 14. 14. 14. 14. 15. 14. 15.	d Agont signature required TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS DITY - ST - ZIP TITLE IAME STREET ADDRESS	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change	DRS IN 12 Addition Addition
or register familiar wit SNATURE	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	Iorida, Such change was at section 607,0505, Florida Stage and the Itage Lake AND DIRECTORS	(NOTE Registers 11.1 1.2 1.3 1.3 1.4 (C. 1.1 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.	d Agont signature required TITLE IAME STREET ADDRESS DITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change	DRS IN 12 Addition Addition
or register familiar wit GNATURE	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	(NOTE Registers 13. 13. 14. 13. 14.	d Agont signature required TITLE IAME STREET ADDRESS DITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 Addition Addition
or register familiar wit gnature	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	(NOTE Registers 13. 13. 14. 13. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14. 15. 16.	d Agont signature required TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE IAME STREET ADDRESS SITY - ST - ZIP TITLE	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition
OF REGISTER GENATURE LE ME REFLADDRESS Y-ST-ZIP LE ME REFLADDRESS	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	(NOTE Regularia tratutes 13. 13. 14. 1. 1. 1. 1. 1. 1.	d Agont signature required TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE IAME	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
OF REGISTER GINATURE LE ME REELADDRESS Y-ST-ZIP LE ME REELADDRESS	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	(NOTE Registers 13. 13. 14. 1. 1. 1. 1. 1. 1.	d Agont signature required TITLE IAME STREET ADDRESS DITY-ST-ZIP TITLE IAME IAME STREET ADDRESS	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition
OF REGISTER GNATURE ME M	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	## PROJECT PROJECT	d Agont signature required TITLE IAME STREET ADDRESS SITY-ST-ZIP TITLE IAME IAME STREET ADDRESS SITY-ST-ZIP TITLE IAME	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition Addition
OF REGISTER GNATURE LE ME REFLADDRESS Y-ST-ZIP LE	ed agent, or both, in the State of Fith, and accept the obligations of Signature, the designation of Signature, the designation of FICERS PD HILLARY, DENNIS W. 619 STATE ROAD 50 GROVELAND FL STD HILLARY, SHAUN 619 STATE RD. 50	DELET	### ##################################	d Agont signature required TITLE IAME STREET ADDRESS DITY-ST-ZIP TITLE IAME IAME STREET ADDRESS	rd of directors. Thereby accept the ap	DATE FFICERS AND	D DIRECTO Change Change Change	DRS IN 12 DRS IN 12 Addition Addition Addition Addition

1/22/96 904-429-\$157 SIGNATURE: DONIVIS W. HILLARY SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR