

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90005 031 ***550.00

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1. Entity Name
**BRYANT BROTHERS LANDSCAPING AND PROPERTY
MAINT. INC.**

Principal Place of Business
**3418 EMERALD ISLE CIR. WEST
JACKSONVILLE, FL 32216**

Mailing Address
**3418 EMERALD ISLE CIR. WEST
JACKSONVILLE, FL 32216**

4364

54072470



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

*Before
incorporated*

09012004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3699985 27-0072395

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRYANT, JAMES C JR.
3418 EMERALD ISLE CIR. WEST
JACKSONVILLE, FL 32216**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BRYANT, JAMES C JR.**
STREET ADDRESS **3418 EMERALD ISLE CIR. WEST**
CITY-ST-ZIP **JACKSONVILLE, FL 32216**

TITLE **S** ☐ Delete
NAME **BRYANT, JAMES A**
STREET ADDRESS **3418 EMERALD ISLE CIR. WEST**
CITY-ST-ZIP **JACKSONVILLE, FL 32216**

TITLE **T** ☐ Delete
NAME **BRYANT, JOHN A**
STREET ADDRESS **6631 BARBURY RD.**
CITY-ST-ZIP **JACKSONVILLE, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James C Bryant Jr.* **James C Bryant Jr.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-7-04
Date

904-813-6817
Daytime Phone