

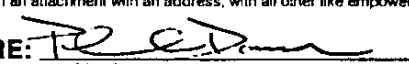


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005 8:00 am
Secretary of State

06-15-2005 90093 050 ***158.75

DOCUMENT # P03000141910			
1. Entity Name PAUL'S PLANTSCAPING CO.			
Principal Place of Business 2220 LIME TREE DRIVE EDGEWATER, FL 32141		Mailing Address 2220 LIME TREE DRIVE EDGEWATER, FL 32141	
2. Principal Place of Business 2019 S. RIDGEWOOD AVE		3. Mailing Address 2019 S. RIDGEWOOD AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State EDGEWATER, FL		City & State EDGEWATER, FL	
Zip 32141	Country USA	Zip 32141	Country USA
6. Name and Address of Current Registered Agent DOEMER, PAUL C 2220 LIME TREE DRIVE EDGEWATER, FL 32141		7. Name and Address of New Registered Agent Name DOEMER, PAUL C Street Address (P.O. Box Number is Not Acceptable) 2019 S. RIDGEWOOD AVE. City EDGEWATER FL 32141	
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  DATE 6-11-2005 <small>Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PVTS DOEMER, PAUL C 2220 LIME TREE DRIVE EDGEWATER, FL 32141	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 2019 S. RIDGEWOOD AVE. EDGEWATER FL 32141	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  PAUL C. DOEMER		Date 6-11-2005 Devine Phone # 396-679-8898	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Devine Phone #</small>	

66024270



06102005 Chg-P CR2E034 (10/03)

4. FEI Number
20-0453103

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

DOEMER, PAUL C
2220 LIME TREE DRIVE
EDGEWATER, FL 32141

Name **DOEMER, PAUL C**


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

2019 S. RIDGEWOOD AVE.

City **EDGEWATER** FL **32141**

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



(NOTE: Registered Agent signature required when reinstating)

DATE

6-11-2005

**FILE NOW! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.183(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVTS
DOEMER, PAUL C
2220 LIME TREE DRIVE
EDGEWATER, FL 32141**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2019 S. RIDGEWOOD AVE.
EDGEWATER FL 32141**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

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SIGNATURE:

 **PAUL C. DOEMER**

Date **6-11-2005**

Devine Phone # **396-679-8898**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Devine Phone #



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

ATTACHMENT

C06024070

WAIVER
OF LATE FEE

June 17, 2005

PAUL'S PLANTSCAPING CO.
2019 S RIDGEWOOD AVE
EDGEWATER, FL 32141

Subject: PAUL'S PLANTSCAPING CO.

Reference Number: P03000141910

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$391.25.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/LS

ANNUAL REPORTS SECTION