FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000010594 (9)

GREENSCAPE SERVICES-DESIGN & INSTALLATION CORPOR **ATION**

Principal Place of Business 8000 FRUITVILLE ROAD

Mailing Address

8000 FRUITVILLE ROAD

FILED Jan 23 1998 8:00am Secretary of State



3. Date Incorporated or Qualified 12/10/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2d 65-0387893 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State Capture Country Country Suite Incorporated or Qualified 12/10/1992 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired Fee Required Fee Required \$5.00 May Be Added to Fees	SARASOTA FL 34240		SARASOTA FL 34240				DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 22. Mailing Address 4. FEI Number Applied For Not Applicable St. FEI Number Applied For Not Applicable Not Appli	បទ		US					
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Suite, Apt #, etc. Suite, Apt #, etc. Suite, A	— • • • • • • • • • • • • • • • • • • •						7,458.00.10.	
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City & State	22	,, 5.0.	—					
Zip Country Zip Country Zip Country Zip Country Zip Sip Country Zip Sip Si		1	City & State				6. Election Campaign Financing \$5.00 May Be	
Zip Country Zip Country Zip Country Bis Size Intercept Internation owes or has paid the current year Internation over the sum of the personal Property Tax Acute June 30.	23		28				, + +	
9. Name and Address of Current Registered Agent WILSON, WILLIAM T. 1387 S. MCNITOSH RD. SARASOTA FL 34238 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 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, it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. STREET ADDRESS 14. CTY-ST-2P TITLE P. DELETE 11. TITLE P. LORING AGENT		Country	Zip		ountry		8. This corporation owes or has pald the current year Intangible	
WILSON, WILLIAM T. 6187 S. MCINTOSH RD. SARASOTA FI. 34238 B2 Street Address (P.O. Box Number is Not Acceptable)	24	25	29	30				
WILSON, WILLAM I. 6187 S. MCINTOSH RD. SARASOTA FL 34238 82 Street Address (P.O. Box Number is Not Acceptable) 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 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, 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, or both, in the State of Florida. Statutes. SIGNATURE Signature, hyped or printed remo of registered agent and title appointment as registered Agent agent to a finite appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. GITV-51.2IP ITILE V ULSON, WILLIAM T 1501 RIDGEWOOD LANE 13. SIREF ADDRESS SARASOTA FL 14. GITV-51.2IP ITILE V ULSON, DARRELL 33. SIREF ADDRESS 3120 EDEN MILLS DR. 23. SIREF ADDRESS 3120 EDEN MILLS DR. 33. SIREF ADDRESS STEET ADDRESS SARASOTA FL 1501 RIDGEWOOD LANE 33. SIREF ADDRESS SARASOTA FL 1501 RIDGEWOOD LANE 34. GITV-51.2IP ITILE DELETE 1711 LE DELETE 1711	Name and Address of Current Registered Agent				١.,		10. Name and Address of New Registered Agent	
SARASOTA FL 34238 83	WILSON, WILLIAM T.				81	Name	·	
SARASOTA FL 34238 83	618	7 S. MCINTOSH RD.	82 Street A		Street A	ddress (P.O. Box Number is Not Acceptable)		
B4 City FL 85 Zip Code	SAF	RASOTA FL 34238						
1. 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 of control of the provisions of sections 607.0502, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent. I am amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Addition of the corporation's board of directors. I hereby accept the appointment as registered agent agent to the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent. Section 607.0505, Florida Statutes, the appointment agent agent to the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent. In agent					83			
SIGNATURE True					84	City	FL 85 Zip Code	
SIGNATURE Signature. Speed or prened name of inglistered agent and tide it applicable. (NOTE. Registered Agent signature required when reinstating)								
SIGNATURE Signature. Speed or prened name of inglistered agent and tide it applicable. (NOTE. Registered Agent signature required when reinstating)	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.							
12.	SIGNATI IRF							
TITLE	Signature, typed or printed name of registered agent and title if applicable. [NOTE, Registered Age					nt signature re		
NAME				_1_				
STREET ADDRESS 1501 RIDGEWOOD LANE 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			☐ DELETE				Li Change Li Addition	
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	I .			- 1				
6.4 CITY-ST-ZIP 14. 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	14. I herebu o	ertify that the information supplied with	this filing does not qualify for				in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

indicated on this annual report or supplied with this little does not qualify in the exemption stated in Section 119.07(3)(), Florida Statutes. Intriner certify that the Information indicated on this annual report or suppliemental 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.