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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000014396 (5)

REINHOLD LANDSCAPE, INC.

Principal Place of Business Mailing Address 1900 WILLIAMS RD 1900 WILLIAMS RD WINTER GARDEN FL 34787 WINTER GARDEN FL 34787 2. Principal Place of Business Mailing Address

FILED Feb 10 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/21/1992 4. FEI Number Applied For 59-3162111 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Žiji Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **OUTLAW, GARY** 1900 WILLIAMS RD 82 Street Address (P.O. Box Number is Not Acceptable) WINTER GARDEN FL 34787 В3 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Stalutes, the above-named corporation submits this statement for the purpose of changing its registered 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. SIGNATURE (NOTE fle-gistered Agent signature required when reinstaling) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Addition Change TITLE 11 TITLE Reinhold, Melanie REINHOLD, MELANIE NAME 1.2 NAME 2561 Meedow Wood Drive 6340 SKY LINE DR STREET ADDRESS 1.3 STREET ADDRESS East Lansing, MI48823 EAST LANSING MI CITY-ST-ZIP 1.4 CITY-ST-ZIP STD DELETE Addition TITLE 2.1 TITLE **OUTLAW, GARY** NAME 2 2 NAME 1900 WILLIAMS RD STREET ADDRESS 2.3 STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. City-St-ZiP CITY - ST - ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 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 indicated on this annual report or supplimental 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 accuracy 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 a attaching row this an address.

SIGNATURE:

2-4-98