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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300001564 (2)

BOOTH LANDSCAPE, INC.

	•							<u> </u>	
Principal Place	o of Business	Mailing Address	Mailing Address			-{		AF KUNDA BYKED DAA	H OLD HERL
1755 BWEETWATER W.CIRCLE APOPKA FL 32712 05			1755 SWEETWATER W.CIRCLE APOPKA FL 32712-2481 05						
						3. Date incorporated or Qualified 01/01/1993	1	ate of Last R /01/1996	
	lace of Business		2a. Mailing Address			4. FEI Number		i-	oplied For
Suite, Apt.	# elc	26 Suite, Apt #,	ote			59-3161155		\$8.75	ot Applicable
22	#, Olo.	27]	D10.			5. Certificate of Status Desired			Aggitional equired
City & State	9	City & State				6. Election Campaign Financing			May Bo
23		28				Trust Fund Contribution		Added	
Ζφ	Country	Zip	Coun	ilry		8. This corporation has liability for			199.032,
24	25	29	30			Florida Statutes Yes No			
		s of Current Registered Agent		B1	Name -	10. Name and Address of New Re	gistered	Agent	
	OTH, DENNIS	T AIDALE		1	Name				
	5 Sweetwater wes Opka fl 32712	ST CIRCLE	Į.	32	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)		
APU	JPNA PL 32/12		1	B3					
	·		1	34	City	TO BE THE THE THE THE THE THE THE THE THE TH	FL	85 Zip (Code
11 Pursuant	to the provisions of Section	one 607 0502 and 607 1508 Horid	a Statutes the abo		named corn	pration submits this statement for the		et changing it	te registered
office or r	egistered agent, or both,	in the State of Florida, Such chang	oc was authorized	by	the corporate	oration submits this statement for the on's board of directors. I hereby acce	pt the app	oointment as	registered
	m tamiliar with, and acce	pt the obligations of, Section 607.0	1505, Florida Statu	ios.	•				
SIGNATURE	Signature, typed or printed name of	of registered agent and tile if applicable.	(NOTE: Registered	Ager	nt signature require	of when reinstating)	DATE		
12.		FICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS ANI	D DIRECTOR	RS IN 12
TITLE	PD DILETE		.EDE 1.1 TITE	1.1 TITLE				Change	Addition
NAME	BOOTH, DENNIS	LILINAT AIRACH	1.2 NAM	ΛE					
STREET ADDRESS	1755 SWEETWATER	R WEST CIRCLE	13 STR	Lŧ1 /	ADDRESS				
CITY-ST-ZIP	APOPKA FL	T be	1,4 City		- ZIP				
TALE		LJ Ut1	DELE1{ 2.1 TII					Change	L_ Addition
NAME				2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP TITLE		DEI	.ETE 3.1 7 ITL	• • • • • •	1 - 7li			Change	Addition
NAME I		174.1	3.2 NAM					Change	E_J / labition
STREET ADDRESS					ADDRESS	7.			
CITY-ST-ZIP			3.4 CIT						
TITLE		DEI						Change	Addition
NAME			4 2 NAI	ME					
STREET ADDRESS			4.3 STR	EET A	ADDRESS				
CITY-ST-ZIP			4.4 CITY	Y - \$T	T-ZIP				
TITLE		□ DEI	.Elé 5.1 Till	E				Change	Addition
NAME			5.2 NAN	AF.					
STREET ADDRESS			5.3 STR	£11/	ADDRESS				,
CITY-ST-ZIP	<u></u>		5.4 CITY	/- \$T	-7IP			·	
TITLE		☐ DE	.ETE 6.1 10L	.E				Change	Addition
NAME			6.2 NAM	ΛE					
STREET ADDRESS			: 6.3 \$1R	EET A	ADORESS				
AUTH AT THE			0.000		THE STATE OF THE S				

14. I do 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 of supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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, of on an attachment with an address.

CICMATUDE.

DENNIS BOOTH 4/27/97 407-884-95

FILED

May 08 1997 8:00am

Secretary of State