2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000032466

1. Entity Name
ANDERSON LANDSCAPE MAINTENANCE OF HOBE SOUND, INC.

Principal Place of Business	Mailing Address
5703 SE ORANGE BLOSSOM TRAIL HOBE SOUND, FL 33455 US	P.O. BOX 1308 HOBE SOUND, FL 33475 US

DO NOT WRITE IN THIS SPACE

01062004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0412028
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, DAVID P
5703 SE ORANGE BLOSSOM TRAIL
HOBE SOUND, FL 33455

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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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANDERSON, DAVID P
STREET ADDRESS	5703 SE ORANGE BLOSSOM TRAIL
CITY-ST-ZIP	HOBE SOUND, FL 33455
TITLE	ST
NAME	ANDERSON, HEATHER
STREET ADDRESS	5703 SE ORANGE BLOSSOM TR
CITY-ST-ZIP	HOBE SOUND, FL 33455
TITLE	
NAME	
STREET ADDRESS	
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NAME	
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01/08/04-80004-025 150.00

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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: Heather Anderson HEATHER ANDERSON 1/6/04 (772)546-8608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #