## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P93000050298 (7)

**DOCUMENT #** 

RINGSMUTH LANDSCAPING, INC.					
Principal Place of Business Mailing Address  18600 TAMPA RD. 18600 TAMPA RD.  FT. MYERS FL 33912 FT. MYERS FL 33912			2		
				3. Date incorporated or Qualified 07/12/1993	3a. Date of Last Report 04/25/1995
2. Principal Pla 21	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0421436	Applied For Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
7ip <b>24</b>	Country 25	Zip <b>29</b>	Country 30	8. This corporation has liability for Florida Statutes Yes	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	Registered Agent
18600 T	IUTH, JOHN MICHAEL S 'AMPA RD. ERS FL 33912		<ul><li>81 Name</li><li>82 Street Ar</li><li>53</li><li>84 City</li></ul>	ddress (P.O. Box Number is Not Acceptat	FL 85 Zip Code
familiar with	h, and accept the obligations of, Secl Signature, typed or printed name of registered agent	tion 607.0505, Florida Statute	tes, the above-named corp zed by the corporation's b s.	coration submits this statement for the pur oard of directors. I hereby accept the appropriate when reinstating?	mann of chancing its registered affer
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PINICOMETEL IOUNEMOUNT	DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME	RINGSMUTH, JOHN MICHAE	-L S	1.2 NAME		
STREET ADDRESS	18600 TAMPA RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL		14 CITY - ST - ZIP		
TITLE	V	DELETE	2 1 TITLE		Change Addition
NAME	RINGSMUTH, ERIC		2.2 NAME		
STREET ADDRESS	7186 MAIDA LN, #84		2 3 STREET ADDRESS		
CHTY-ST-ZIP	FT MYERS FL		2.4 CITY-ST-ZIP		
TITLE	DIMOCRATITAL POLINIAL	☐ DELETE	3 1 TITLE		Change Addition
NAME	RINGSMUTH, JOHN H.		3 2 NAME		- —
STREET ADDRESS	1320 BRADFORD RD FT MYERS FL		3 3 STREET ADDRESS		
C-TY-ST-Z-P	FI MICHO FL		3 4 CITY - ST - ZIP		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-S1-ZIF	·		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHTY-ST-ZIP THLE		□ DC) CTC	5 4 CiTY - ST - ZiP		
NAME		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		ł
CITY-ST-ZiP	cortify that the information a unalist	with this files is unless. 9.7	6 4 CITY- ST-ZIP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 attackment with an address.

SIGNATURE:

4-15-96 941-267-7343