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

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| CORPORATION | j |
| ANNUAL REPOR | 7 |



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000059450 (5)

DOCUMENT # 1. Corporation Name

NADEAU'S LAWN CARE AND LANDSCAPING, INC.



| | ee of Business | | | | | |
|--|--|---------------------------------------|--|---|---|---|
| 1325 BAYPO | | Mailing Address | _ | | | |
| | AND FL 33937 | 1325 BAYPORT AVE MARCO ISLAND FL | | | | |
| | | | | | 3. Date Incorporated or Qu 08/20/1993 | alified 3a. Date of Last Report 05/01/1995 |
| 21 | Place of Business | 2a. Mailing Address 26 | | - | 4. FEI Number 02-0421607 | Applied For Not Applicable |
| Suite, Apt. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Des | ¢0.75 |
| City & Stat | | City & State | | | 6. Election Campaign Finar Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | L- Cou | ntry | | ility for intangible tax under s. 199.032, |
| 24 | 25 | 29 | 30 | | | ¥ Yes □ No |
| | 9, Name and Address of Cur | rent Hegistered Agent | | | 10. Name and Address of | New Registered Agent |
| NADEA | .U, DAVID | | • | B1 Name | | |
| | AYPORT AVE. | | | 82 Street A | ddress (P.O. Box Number is Not Ac | cceptable) |
| |) ISLAND FL 33937 | | | | | |
| WANCO | 7 ISLAND PL 33937 | | | 83 | | |
| | | | • | 84 City | | lee 7:- O-di |
| | | | | 1 " | | FL 85 Zip Code the purpose of changing its registered office |
| SIGNATURE | ith, and accept the obligations of, Si Signature typed or printed name of registered as | | | Acent piggal up ser | juired when reinstating | DATE |
| | | | THE TE HOSPOTOROUS | Agent signature rec | forest when tensiality | DATE |
| | OFFICERS A | AND DIRECTORS | 13. | Agoni aignatoro rac | | |
| Tillé | P | AND DIRECTORS DELETE | | | | O OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLÉ NAME | NADEAU, DAVID | AND DIRECTORS | 13. | TLF | | O OFFICERS AND DIRECTORS IN 12 |
| TITLÉ NAME | NADEAU, DAVID 1325 BAYPORT AVE. | AND DIRECTORS | 13. 1. 1 TH | TLF | | O OFFICERS AND DIRECTORS IN 12 |
| TITLE NAME STREET ADDRESS CITY+ST+ZIP | NADEAU, DAVID | AND DIFFECTORS DELETE | 13. 1. 1 TH 1.2 NAI 1.3 STF | TLF ME | | O OFFICERS AND DIRECTORS IN 12 |
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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 Curporation 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.

SIGNATURE: JALLE SIGNATURE AND

Susan Nedeau