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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000085448 (7) **DOCUMENT #** 

1. Corporation Name

POLK SOD SERVICES, INC.



	ROAD 554 EN FL 33881	5880 State Road 55 Winter Haven FL 33			3. Date Incorporated or Qualified 12/08/1993	3a. Date of Last 05/01	/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number APPLIED FOR 59	-3226701	Applied For Not Applicable	
<u> </u>		26			\$8	75 Additional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	7 7 7 7	ee Required	
<u> </u>		City & State			6. Election Campaign Financing	<b>\$</b> 5	.00 May Be
City & State		28			Trust Fund Contribution		ided to Fees
Zip	Country	Zip	Country	,	8. This corporation has liability for	intangible tax unde	rs 199.032,
جرد الم الم	25	29	30		Florida Statutes L Yes  10. Name and Address of New F	No No	
1	9. Name and Address of Curren	t Registered Agent	·_ ·_ ·	т-:	10. Name and Address of New r	registered Agent	
			81				
PARKER, CHRISTINE L 23 WEST BROWADWAY			82 Street Add		ddress (P.O. Box Number is Not Acceptable)		
FT. MEA	NDE FL 33841		63	'			<del> </del>
			84	1 '		FL 65	Zip Code
					ration submits this statement for the pu and of directors. Thereby accept the app	irpose of changing	its registered office
SI	gnature typed or printed name of registered agent OFFICERS AN		TE Registered At		ed what revisitating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRE	CTORS IN 12
SIGNATURE SI	OFFICERS AN		13. 1. 1 I <sup>-</sup> III	-4	ADDITIONS/CHANGES TO OF	FICERS AND DIRE	CTORS IN 12 nge
SI 112. TITLE	OFFICERS AN STD PARKER, CHRISTINE L	D DIRECTORS	13. 1. 1 T/T// 1.2 NAM	-4	ADDITIONS/CHANGES TO OF Secretary Treasu	FICERS AND DIRE	CTORS IN 12 nge Addition
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STREET ADDRESS 14. 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 for 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 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 nappears in Block 12 or Block 13 if changed, or on an attachment with an address. 6.4 CITY - S1 - ZIP