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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P93000088591 (1)

DOCUMENT #
1. Corporation Name

MCKIBBEN LANDSCAPING, INC.

Principal Place of Business Mailing Address  CHARLES MCKIBBEN CHARLES MCKIBBEN						
1810 US 17 S 1810 US 17 S						
AVON PARK I	-L 33925	AVON PARK FL 33825		3. Date Incorporated or Qualified 12/28/1993	3a. Date of Last Report 05/01/1995	
2. Principal Pla		2a. Mailing Address		4. FEI Number	Applied For	
	SE 175	26 1810 SR 1	7 <i>5</i>	59-3223865	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State  AVON	Park FI	City & State  28 AVON PAR	V EI	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip /T VON / A/	Country	8. This corporation has liability for i	Added to Fees	
24 338	25 25 Highlands		30 Highlan		*	
	9. Name and Address of Current			10. Name and Address of New R		
MOUNDE			81 Name			
	EN, CHARLES	Address (P.O. Box Number is Not Acceptab	le)			
1810 US 17 S AVON PARK FL 33825						
AVON FA	ANN FL 33023		83			
			84 City		85 Zip Code	
11. Pursuant to	the provisions of Sections 607.0502	and 607 1508. Florida Statutes	the above-named co	progration submits this stalement for the pur	rose of changing its registered office	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,7105, Florida Statutes.						
		11 6017 005, Florida Statutes.				
SIGNATURE _	ilgnature typed or printed name of registered agrant a	ed title if applicable (NOTE	Registered Agent signature r	equired when reinstating)	5-11-96	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12	
TITLE	D MCKIBBEN, CHARLES	DELETE	1. 1 TOLE	McKibben Charles	Change Addition	
NAME	1810 US 17 S		1.2 NAME	1810 SR 175		
STREET ADDRESS	AVON PARK FL 33825		1.3 STREET ADDRESS	1810 SR 17 5 AVON FARK F1 3382	25	
CITY-ST-ZIP TITLE	7.7.017.7.11.7.12.00020	[] DELETE	1.4 CITY - ST - ZIP 2 1 TITLE			
NAME		L_J bearie	2 2 NAME		Change Addition	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		DELETE	3 1 TITLE		Change Addition	
NAME			3.2 NAME		2.0	
STREET ADDRESS			33 STREET ADDRESS			
City-St-ZiP			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE	4. 1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		EJ DELETE	4.4 CITY- ST-ZIP			
TITLE NAME		☐ DELETE	5 1 Till(F		Change Addition	
STREET ADDRESS			5 2 NAME			
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
TITLE		[7] DELETE	6 1 TITLE		Change Addition	
NAME		<del></del> -	6.2 NAME		المادين المادين المادين المادين	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP			6.4 CITY - ST - ZIP			
certify that oath; that I	the information indicated on this annua	n report or supplemental annua ation or the receiver or trustee a	ned and does not qua il report is true and ac empowered to execut	Ify for the exemption stated in Section 119. curate and that my signature shall have the e this report as required by Chapter 607, Fig.	same legal effect as if made under	

SIGNATURE:

Charles L McK.bbin 5-11-96 941453-4700