FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000036185 (4)

1. Corporation Name
ADAM'S LANDSCAPING AND LAWN SERVICES, INC.

Principal Place of Business	Mailing Address
508 WEST 29TH ST. RIVIERA BEACH FL 33404	508 WEST 29TH ST. RIVIERA BEACH FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/09/1994
3a. Date of Last Report:

2. Principal Place of Business — 21 — Suite, Apt. # etc. 22 — City & State 23 — Zip 24 — Country 25
2a. Mailing Address — 26 — Suite, Apt. # etc. 27 — City & State 28 — Zip 29 — Country 30

4. FEI Number: 65-0488360 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ADAMS, ALSTON
508 WEST 29TH ST.
RIVIERA BEACH FL 33404

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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 607.0505, Florida Statutes.

SIGNATURE — REGISTERED AGENT — DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ADAMS, ALSTON
STREET ADDRESS	508 WEST 29TH ST.
CITY-ST-ZIP	RIVIERA BEACH FL 33404

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

(TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — ☐ Change ☐ Addition — blank)

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)(i), 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 attachment with an address.

SIGNATURE: Alston A. Adams — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 4/1/95

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