FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000037777 (7)

GATOR MAINTENANCE, INC.

Principal Place of Business 11486 STATE ROAD 84 Mailing Address

FILED May 06 1997 8:00am Secretary of State



DAVIE FL 33325		11486 STATE ROAD 84 DAVIE FL 33325-4006				
					3. Date Incorporated or Qualified 05/19/1994	3a. Date of Last Report 05/01/1996
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			65-0493259	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				60.75
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for j	ntangible tax under s. 199.032.
24	25 29 30		30] Yes 🔲 No
9. Name and Address of Current Registered Agent				· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	ylstered Agent
VANDERGRIFT, JOHN				1 Name		
	86 STATE ROAD 84		8	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)
DAVIE FL 33325						
			8	3		
			8	4 City		85 Zip Code
				1		FL '
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 607.0506, Florida Statules.						
SIGNATURE	Signature, typed or printed name of registered				ried when reinstating)	DATÉ
12.		AND DIRECTORS	13.	grav alg totale redail	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	DELETE	1.1 TITLE		ABBITION OF THE OFFICE OF THE	Change Addition
NAME	STEINMARK, FRED P		1.2 NAMI	J.		
STREET ADDRESS 7000 W. PALMETTO PARK RD.		RD., STE. 408		E1 ADDRESS		
CITY-ST-ZIP BOCA RATON FL 33433		·	1.4 CHY+ST-ZIP			[]
TITLE	D	DELETE	2.1 TITLE			Change Addition
NAME	ASHENFELTER, MARIA		2.2 NAM			
STREET ADDRESS 7000 W. PALMETTO PARK RD.,		RD., STE. 408	2.3 STREET ADDRESS			
CITY-ST-ZIP BOCA RATON FL 33433		·	2 4 CITY-ST-ZIP			
TITLE		DELETE	3 1 11TLF			Change Addition
NAME			3.2 NAM		•	
STREET ADDRESS			3.3 STRE	E1 ADDRESS		
CITY-ST-ZIP			3.4. CITY	- S1 - 7IP		
TITLE		DELETE 41 TI				Change Addition
NAME			4.2 NAM	E		-
STREET ADDRESS			4 3 STHE	E1 ADDRESS		
CITY-ST-ZIP			4.4 CITY	į.		
TITLE		DELETE	51 THLE			Change Addition
NAME			5.2 NAMI			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP		
TITLE		DELETE	61 TITLE			Change Addition
NAME			6.2 NAM			3
STREET ADDRESS				E1 ADDRESS		
CITY-ST-ZIP			6.4 CITY	l		

4. I do hereby certify that the information supplied with this filing 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 affect as if made under eath; 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.

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