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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name P94000054149 (7)

LEE'S LAWN & TREE SERVICE, INC.

## **FILED** May 22 1998 8:00am Secretary of State



				<u>-</u>				
Principal Place of Business Mailing Address						1 <b>81</b> 1(1 <b>8186</b> ) 1(6)(	atara táli 1881	
3811 PINE WO	DOD AVE B <b>eac</b> h fl 33407	3811 PINE WOOD AVE WEST PALM BEACH FL 33407						
ALEGS LUCK	DEMONT LE 90407	WEST TROW DENC	WITE 30407		DO NOT WRITE IN TH	IIS SPACE		
					3. Date Incorporated or Qualified			
					07/21/1994			
	ace of Business	<b>2a.</b> Mailing Address	· ·		4. FEI Number		Applied For	
Suite, Apt	# Alo	26			65-0502561		Not Applicable	
22		27			5. Certificate of Status Desired		Additional Required	
City & State		City & State			6. Election Campaign Financing	\$5.0	0 May Be	
<b>23</b> Zip	Country	28	Zip Cointry		Trust Fund Contribution Added to Fees			
24	25)	29	30		8. This corporation owes or has paid the			
<u> </u>	g. Name and Address of Curre	·	1901		Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes Acont	□ No	
TA	YLOR, LEVESTER		81	Name	The state of the s	u Agent	<del></del>	
3811 PINEWOOD AVE				Street Add	treet Address (P.O. Box Number is Not Acceptable)			
WEST PALM BEACH FL 33407				Olivet Add	ress (F.O. Box Number is Not Acceptable)			
			83					
			84	City				
		.,		,	F		Code	
11. Pursuant t office or re agent. I ar	o the provisions of Sections 607.056 egistered agent, or both, in the State n familiar with, and accept the oblic	02 and 607 1508, Florida e of Florida. Such chan <mark>ge</mark> yations of, Section 60 <b>7.0</b> 5	Statutes, thibbove was authord by 05, Florida Mules	i-named corp the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing ppointment as	its registered s registered	
SIGNATURE .	Signature typed or printed name of regulered as	to adjust south adds	(NÓTE Regi <b>re</b> d Ager	d reporture repui			1	
12.		ND DIRLCTORS	(NOTE TAILBREE AGO)	ir aid iginici tedina	DATE	ID DIDEOTO		
TITLE	D	☐ DELE	TE ITLE		ADDITIONS/CHANGES TO OFFICERS AI	ND DIRECTOR  Change	RS IN 12	
NAME	TAYLOR, LEVESTER		NAME			C Cularige	L Addition	
STREET ADDRESS	\$811 PINE WOOD AVE		STREET A	address				
CITY-ST-ZIP	WEST PALM BEACH FL 334		City-St	- ZIP			15	
TITLE	D	☐ DELE	TE INLE			Change	Addition	
NAME	TAYLOR, JANICE		, NAME					
STREET ADDRESS	3811 PINE WOOD AVE	10.7	STREET A				ľ	
CITY-ST-ZIP	WEST PALM BEACH FL 334	IO/	City-St	-ZIP				
TITLE		☐ Utit				Change	Addition	
NAME			NAME CODOCT A	DDD CC			ĺ	
STREET ADDRESS			STREET AI City-St-					
CHY-ST-ZIP TITLE		DELE		211				
NAME		ت د د د د د د د د د د د د د د د د د د د	NAME			Change	☐ Addition	
STREET ADDRESS			STREET AT	DRESS				
CITY-ST-ZIP			CITY-ST-					
TITLE		☐ DELE				Change	Addition	
NAME			NAME	j		- viange	AUURION	
STREET ADDRESS			STREET AD	DRESS			]	
CITY-ST-ZIP			CITY-ST-2	IP I			1	
TITLE		DELF	TE THE			Change	Addition	
NAME			NAME				- PANICUI	
STREET ADDRESS			STREFT AD	DRESS				
CITY-ST-ZIP			CITY-SI-Z					
14. I hereby o	certify that the information supplied	with this filling does not <b>q</b> uat applied report is true a	ualify for xemption nd acculing that r	stated in Se	ection 119.07(3)(i), Florida Statutes. I further ce	rtify that the i	nformation	

indicated on this annual report or supplemental annual report is true and accume that my signature shall have the same legal effect as if made under oath; that I am an efficiency of the corporation or the receiver or frustee empowered to be this report as required by Chapter 607, Florida Statutes; and that my name appears in the statutes of the corporation or an attrictment with an address