

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -2 AM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000056780 (7)**

1. Corporation Name

FIRST CLASS LAWN SERVICE INC.

Principal Place of Business

**8102 NW 74 TER
TAMARAC FL 33321**

Mailing Address

**8102 NW 74 TER
TAMARAC FL 33321**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1994

3a. Date of Last Report

4. FEI Number

59-3474777

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

2. Principal Place of Business

Suite, Apt. #, etc

City & State

2a. Mailing Address

Suite, Apt. #, etc

City & State

24

25

Country

29

30

Country

9. Name and Address of Current Registered Agent

**MCCLURE, JEFFREY C
8102 NW 74 TER
TAMARAC FL 33321**

10. Name and Address of New Registered Agent

81 Name

Joel Rudolph

82 Street Address (P.O. Box Number is Not Acceptable)

8102 NW 74 Terrace

83

84 City

Tamarac

FL

85 Zip Code

33321

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 607.0505, Florida Statutes.

SIGNATURE:

Joel Rudolph

(NOTE: Registered Agent signature required when resigning.)

DATE:

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MCCLURE, JEFFREY C
STREET ADDRESS	8102 NW 74 TER
CITY ST ZIP	TAMARAC FL 33321
TITLE	DV
NAME	RUDOLPH, BETH D
STREET ADDRESS	8102 NW 74 TER
CITY ST ZIP	TAMARAC FL 33321
TITLE	DS
NAME	RUDOLPH, LYNDIA
STREET ADDRESS	8102 NW 74 TER
CITY ST ZIP	TAMARAC FL 33321
TITLE	DT
NAME	RUDOLPH, JOEL
STREET ADDRESS	8102 NW 74 TER
CITY ST ZIP	TAMARAC FL 33321
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change ☐ Addition ☐
1.2 NAME	<i>Jeffrey McClure</i>
1.3 STREET ADDRESS	
1.4 CITY ST ZIP	
2.1 TITLE	Change ☒ Addition ☐
2.2 NAME	<i>Beth D. Rudolph</i>
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	Change ☐ Addition ☐
3.2 NAME	<i>Lyndia Rudolph</i>
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	Change ☐ Addition ☐
4.2 NAME	<i>Joel Rudolph</i>
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	Change ☐ Addition ☐
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY ST ZIP	
6.1 TITLE	Change ☐ Addition ☐
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY ST ZIP	

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****200.00 ****200.00**

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 119.073(k), 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, as applicable, or on an attachment with an address.

SIGNATURE:

Joel Rudolph

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WORK 724-8006

4/24/95
Home - 721-6373