

FILE NOW: FILING FEE AFTER MAY 1-1S \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
CORPORATION REPORT

DOCUMENT # P94000088837 (7)

STONER LANDSCAPING CORPORATION

**APPROVED
AND
FILED**

95 APR -7 AM 5:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Principal Office Address 409 ZIMMERMAN DRIVE ORLANDO FL 32809		2a. Mailing Address 409 ZIMMERMAN DRIVE ORLANDO FL 32809		3. Date Report Filed (Month/Day/Year) 12/07/1994		3b. Date of Last Report	
2. Principal Office Telephone Number 21		2a. Mailing Address Telephone Number 26		4. FIC Number 59-329665		Applied For Not Applicable	
22. State Apt. # City 22		27. State Apt. # City 27		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. City & State 23		28. City & State 28		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country 24		25. Country 25		29. Country 29		30. Country 30	
9. Name and Address of Current Registered Agent SLATER, WILLIAM E 409 ZIMMERMAN DRIVE ORLANDO FL 32809				10. Name and Address of New Registered Agent			
				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. City			
				84. State FL			
				85. Zip Code			

11. Pursuant to the provisions of Sections 607.06(2) and 607.06(3) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in 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 Sections 607.06(2) Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME P STONER, OTTO E	1. STREET ADDRESS 409 ZIMMERMAN DRIVE ORLANDO FL 32809	1. NAME ☐ Change ☐ Addition	
2. NAME VST STONER, PATRICIA A	2. STREET ADDRESS 409 ZIMMERMAN DRIVE ORLANDO FL 32809	2. NAME ☐ Change ☐ Addition	
3. NAME	3. STREET ADDRESS	3. NAME ☐ Change ☐ Addition	
4. NAME	4. STREET ADDRESS	4. NAME ☐ Change ☐ Addition	
5. NAME	5. STREET ADDRESS	5. NAME ☐ Change ☐ Addition	
6. NAME	6. STREET ADDRESS	6. NAME ☐ Change ☐ Addition	
7. NAME	7. STREET ADDRESS	7. NAME ☐ Change ☐ Addition	
8. NAME	8. STREET ADDRESS	8. NAME ☐ Change ☐ Addition	
9. NAME	9. STREET ADDRESS	9. NAME ☐ Change ☐ Addition	
10. NAME	10. STREET ADDRESS	10. NAME ☐ Change ☐ Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.06(3) Florida Statutes. I further certify that the information included in this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am a director or officer of the corporation or the person or persons responsible for executing this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attached form with an address.

SIGNATURE: *Otto E Stoner*
OTTO E. STONER (PRESIDENT)

3/1/95 851-1110