SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 JUL -5 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **P94000089988 (7)**

1. Corporation Name

DOUBLE S LAWN SERVICE UNLIMITED, INC.

Principal Place of Business
14403 PINECONE ROAD
ORLANDO FL 32832

Mailing Address
14403 PINECONE ROAD
ORLANDO FL 32832

3. Date Incorporated or Qualified: 12/12/1994

3a. Date of Last Report:

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 County — 30

4. FEI Number: 59-3284255 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Division Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has actively filed an employer tax return in Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SAULS, LARRY C
14403 PINECONE ROAD
ORLANDO FL 32832

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 607.0505 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: Larry C Sauls — 6/29/95
Date

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: SAULS, LARRY C
STREET ADDRESS: 14403 PINECONE ROAD
CITY, ST, ZIP: ORLANDO FL 32832

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12 — ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is accurately transcribed and does not exceed the compensation stated in Section 119.07(4)(b), 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: Larry Sauls — 6-29-95 — 407. 277. 7801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (3/95)

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