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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90006 001 ***150.00

DOCU	MENT # P950	0000356	5					
ou.po	. ,			. IN				
RICHARD'S PROFESSIONAL LANDSCAPE MAINTENANCE, IN C.								
Principal Place of Business Mailing Address								
6694 EMERSON AVE P.O. BOX 47973						· · · · · · · · · · · · · · · · · · ·		
ST PETERSBURG FL 33707 ST PETERSBURG FL 33743-7				-7973				
US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						01/11/1995	•	
2. Principal F	Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21	26			· · ·		59-3296498	Not Applicable	
	e, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23	- 			•		Trust Fund Contribution	Added to Fees	
Zip	Country Zip			Country		8. This corporation owes the current year I		
24	25	29		30		Personal Property Tax.	¥ Yes □ No	
	9. Name and Address of C		gent	81	Name	10. Name and Address of New Registere	d Agent	
HICKMAN, RICHARD								
6694 EMERSON AVENUE SO 82 Street Address (P.O. Box Number is Not Acceptable)								
ST PETERBURG FL 33707				83				
				84	City		- 85 Zip Code	
<u> pakij militagoj</u>	·			1 1	-	<u>: .</u> F		
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.								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registe	red agent and title if applicable	a. (NOTE:	: Registered Agent	signature required	When reinstating) DATE		
12.	OFFICE	RS AND DIRECTORS	· · · · · · · · · · · · · · · · · · ·	13,		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12	
TITLE	P		☐ DELETE	1.1 YITLE	.]		☐ Change ☐ Addition	
NAME	HICKMAN, RICHARD F	•	•	1.2 NAME))	
STREET ADDRESS	6694 EMESSON AVE SO ST PETERSBURG FL			1.3 STREET A				
CITY+ST-ZIP	31 PETENSBUNG PL	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	1.4 CITY-ST- 2.1 TITLE	ZIP	<u></u>	Change Addition	
NAME				2.2 NAME	{			
STREET ADDRESS	}			2.3 STREET A	DORESS			
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TITLE	Was Visited	er, kirk er egiskirk ist.,	DELETE	3.1 TITLE			☐ Change ☐ Addition	
NAME		Car San Car		3.2 NAME				
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CITY-ST-ZIP	 		DELETE	3.4. CITY-ST- 4.1 TITLE	-ZIP		Change Addition	
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CITY-ST-ZIP		<u> </u>		4.4 CITY-ST-	ZIP	·		
TITLE	, .		DELETE	5.1 TITLE	ļ		☐ Change ☐ Addition	
NAME OTDEST ADDRESS	+		•	5.2 NAME 5.3 STREET A	INDRESS			
STREET ADDRESS CITY-ST-ZIP	9			5.4 CITY-ST-	i	Section 5		
TITLE	<u> स्थित के ता सकता ।</u>		DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME	634 2353536 V			6.2 NAME	1		-,	
STREET ADDRESS	situation and			6.3 STREET A	DORESS	•		
CITY-ST-7IP	1	0		6.4 CITY-ST-	ZIP !	and the second s	Ļ	

14. I 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE