

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

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED  
98 AUG 11 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 1. Corporate Name  
P9500002667  
Pixley's Plant Place, Inc.,

Principal Place of Business Mailing Address  
2600 Britt Rd., P. O. Box 1483,  
Mt. Dora, FL 32756 Mt. Dora, FL 32756

W 98000012232

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
March 30, 1995

4. FEI Number Applied For  
59 3318187 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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 26

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State 28 City & State

24 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name  
WILLIAM C PIXLEY

82 Street Address (P.O. Box Number is Not Acceptable)  
2600 BRITT ROAD

83

84 City  
MT DORA FL 85 Zip Code  
32757

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 officer 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 607.0502, Florida Statutes.

SIGNATURE: *William C. Pixley* DATE: 7-30-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PRESIDENT</b>	NAME William C. Pixley, 5556 Round Lake Rd., Apopka, FL 32702	11 TITLE	12 NAME
STREET ADDRESS	CITY-ST-ZIP	13 STREET ADDRESS	14 CITY-ST-ZIP
TITLE	NAME	21 TITLE	22 NAME
STREET ADDRESS	CITY-ST-ZIP	23 STREET ADDRESS	24 CITY-ST-ZIP
TITLE	NAME	31 TITLE	32 NAME
STREET ADDRESS	CITY-ST-ZIP	33 STREET ADDRESS	34 CITY-ST-ZIP
TITLE	NAME	41 TITLE	42 NAME
STREET ADDRESS	CITY-ST-ZIP	43 STREET ADDRESS	44 CITY-ST-ZIP
TITLE	NAME	51 TITLE	52 NAME
STREET ADDRESS	CITY-ST-ZIP	53 STREET ADDRESS	54 CITY-ST-ZIP
TITLE	NAME	61 TITLE	62 NAME
STREET ADDRESS	CITY-ST-ZIP	63 STREET ADDRESS	64 CITY-ST-ZIP

**REINSTATEMENT**

300002618723-4  
-08/18/98-01039-002  
\*\*\*1058.75 \*\*\*1058.75

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(j), 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: *William C. Pixley* DATE: 4/30/98 352 383 8811

CR2E034 (10/97)