

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000029033 (4)

1. Corporation Name

CPS LANDSCAPE & DESIGN, INC.



Principal Place of Business

5311 HANSEL AVE., D-14  
ORLANDO FL 32809

Mailing Address

5311 HANSEL AVE., D-14  
ORLANDO FL 32809

2. Principal Place of Business

2a. Mailing Address

21 4103 Forrestal Place

26 4103 Forrestal Place

59-3306354

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Applied For  
Not Applicable

22

City & State

27

City & State

\$8.75 Additional  
Fee Required

23 Orlando, FL

28 Orlando FL

Zip Country

Zip Country

5. Certificate of Status Desired ☐

\$5.00 May Be  
Added to Fees

24 32806

25

29 32806

30

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, CODY P  
5311 HANSEL AVE., D-14  
ORLANDO FL 32809

81 Name

Smith, Cody P

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

4103 Forrestal Place

83

84

Orlando

FL

85 Zip Code

32806

11. Pursuant to the provisions of Sections 607.0507 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

*Cody P. Smith*

Cody P. Smith PSTO 3/5/96

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
SMITH, CODY P  
5311 HANSEL AVE., D-14  
ORLANDO FL 32809

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

PSTD  
Smith, Cody P.  
4103 Forrestal Place  
Orlando, FL 32806

☐ Change ☐ Addition

☐ Change ☐ Addition

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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 119.07(3)(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, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/96

407.857-5885

CR2E034 (12/95)