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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1998 8:00am

Secretary of State

941.716.21,22

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P95000054700 (6)

ROGERS TREE AND LANDSCAPING, INC.

Principal Place of Business Mailing Address					i) a biar arrir dedir isacı başın fölk iddi
4103 N. RYE ROAD PARRISH FL 34219 US		4103 N. RYE ROAD Parrish FL 34219 US		DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	
A Dulmalmal D	lone of Business	On Mailing Address	···	07/14/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0677040	¢9.75 Aulditional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pai	
24	25 g, Name and Address of Current	29	30	Personal Property Tax due June 10. Name and Address of New Reg	
00		Hadisteren Adeist	81 Name	IV. Name and Address of New Re	listered Wattr
ROGERS, JAMES CHRISTOP 4103 NORTH RYE ROAD			McGUI	RE, PRATT, MASIO & FAF	
	RRISH FL 34219		82 Street Add 1.001	dress (P.O. Box Number is Not Acceptable 3rd Avenue West, Suit	e 600
r.A.	11110111 2 04215		83		
			94 034		At Zin Code
			84 City Brader	nton,	FL 85 Zip Code 34205
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named cor	poration submits this statement for the pr	urpose of changing its registered
agent. I	edispred agent, or both, in the state to MOD I Aboth Propression	tions of Section 607.0505, Fi	authorized by the corpora lorida Statutes.	ation's board of directors. I hereby accep	t tile appointment as registered
SIGNATURE					3~18.98
	Signate / ped or printed name of registered agen	<u> </u>	TE Ragislered Agent signature requ	ired when reinstating)	DATE
12.	р	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	ROGERS, BETH MICHELLE		1.2 NAME		
STREET ADDRESS	4103 N. RYE ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	PARRISH FL		1.4 CITY-ST-ZIP		
TITLE	V\$	☐ DELETE	2.1 TITLE	- <u>-</u>	Change Addition
NAME	ROGERS, JAMES CHRISTO		2.2 NAME		
STREET ADDRESS	4103 N. RYE ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	PARRISH FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change Addition
NAME		_	4.2 NAME		- 5
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 C/TY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I hereby o	ertify that the information supplied with	h this filing does not qualify f	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I f	urther certify that the information
hotocikai	on this annual report of supplemental	annual conort is true and acc	surate and that my cianati	ure shall have the same legal effect as if quired by Chapter 607, Florida Statutes; a	made under eath: that I am an I
BIOCK 12	OF DIOCK 13 II CHADDONYOF OF ATT ARACI	Jinent with an address.		1	