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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000058741 (6)

FILED Apr 17 1998 8:00am Secretary of State

DMI LA	WNSCAPES, INC.							
Principal Plac	e of Business	Mailing Addr	ress			- I INTAPARA DIA TOMA NAMA NERIK BUMA DUMA ETAT	i syret dodii dodii bil	
400 TONEY PENNA DRIVE 400 TONEY PENNA DRIVE								
JUPITER FL 33458 JUPITER FL 33458						DO NOT WRITE IN TH	HIS SPACE	
						3. Date Incorporated or Qualified		
						07/31/1995		
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number	Ar	oplied For
21		26				65-0598967	No	ot Applicable
Suite, Apt	#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	+	Additional
22	27						equired	
City & Stat	0	→ ·	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00	
Zip	Country	28		Country			Added	
24	25			¬ ′		This corporation owes or has paid the Personal Property Tax due June 30.		angible No
	g. Name and Address of Curre			<u> </u>	_ 	10. Name and Address of New Register		
\/AI				81	Name			
VAUGHN, DAVID K 400 TONEY PENNA DRIVE				82	Chact Add	one (D.O. Bou Number in Not Assessing to		i
	PITER FL 33458			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
00	1 11ER 1 E 35450			83				
								5
				64	City	F	=L 85 Zip (Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607, 1508, F	lorida Statutes	, the above	-named corp	poration submits this statement for the purpos	e of changing it	s registered
office or r agent. La	registered agent, or both, in the Stati im familiar with, and accept the oblic	e of Florida. Such c gations of, Section f	hange was aut 507.0505, Flori	thorized by da Statutes	the corporat 3.	oration submits this statement for the purposion's board of directors. I hereby accept the	appointment as	registered
SIGNATURE	•							
SIGNATIONE	Signature typed or printed name of registered ac		(NOTE: F	Registered Age	ni perutanga in	ed when reinstating) DAT		
12.	<u> </u>	ND DIRECTORS	T priese	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D D	L.	DELETE	1.1 TITLE			Change	☐ Addition
NAME	VAUGHN, DAVID K			1.2 NAME				
STREET ADDRESS	400 TONEY PENNA DRIVE			1.3 STREET	1			- 1
CITY-ST-ZIP TITLE	DELETE DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition	
NAME	SPRINGER, SHERIDAN M		2.2 NAME			Change		
	400 TONEY PENNA DRIVE			2.3 STREET	ADDOCCC			1
STREET ADDRESS	JUPITER FL 33458			•				ļ
CITY-ST-ZIP TITLE	D DELET		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE			Change	Addition
NAME	LEWIS, GLEN	_		3.2 NAME				
STREET ADDRESS	3144 S.E. INDIAN STREET			3.3 STREET	ADDRESS			
CITY-ST-ZIP	STUART FL 34997			3 4. CiTY - 5	- 1			
TITLE			DELETE	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME	[
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - S	T-ZIP			
TITLE			DELETE 5.1				Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY-ST-ZIP				54 CITY-S	T-ZIP			
TITLE		L	DELETE	6.1 TITLE	·		L Change	☐ Addition
NAME .				6.2 NAME				
STREET ADDRESS	ł			6.3 STREET	address			İ
ITY-ST-ZIP				6.4 CITY - S	T-ZiP			

1. 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 roport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the transparence 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 chapter 607 or an attachment with an address.

GNATURE:

David K. Vaugh