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 # P95000059447 (9)

C E C LAWN CARE, INC.

FILED Apr 14 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		E SOURINGE SIN TOURS DISTRIBUTED AND AND AND THE OTHER DUTTE COURT FIRST FROM LOUR
2328 LONGBOAT DR	2328 LONGBOAT DR		
NAPLES FL 33942	NAPLES FL 33942		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			07/26/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21 2319 J & C Bou			65-0409697 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22 # 1 1 City & State	27 City & State		Fee Required
Naples FL	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	untry Zip	Country	8. This corporation owes or has paid the current year Intangible
24 3 4 1 0 9 25	29	30	Personal Property Tax due June 30. Yes No
	dress of Current Registered Agent		10. Name and Address of New Registered Agent
SPERDUTI, CARL 2328 LONGBOAT DR NAPLES FL 33942		81 Name	
		82 Stree	t Address (P.O. Box Number is Not Acceptable)
		83	
		84 City	FL 85 Zip Code
11. Pursuant to the provisions of S	Sections 607.0502 and 607.1508, Florida Sta	tutes, the above-name	d 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 Signature, typed or primed	name of registered agent and title if applicable. (N	IO11 - Registered Agent signatu	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	☐ DELET€	1.1 TITLE	☐ Change ☐ Addition
NAME SPERDUTI, CAI		1,2 NAME	
STREET ADDRESS 2328 LONGBO		1.3 STREET ADDRESS	
CITY-ST-ZIP NAPLES FL 33	942 DELFTE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME	E3 beene	2.2 NAME	
STREET ADDRESS		2 3 STREET ADDRESS	
CITY-ST-ZIP		2. 4 CITY - S1 - ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		: 3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY - ST - ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Addition
NAME INTER	otter	5.2 NAME	C. Oumbo C. Mondon
STREET ADDRESS		5.3 STREET ADDRESS	.]
CITY-ST-ZIP		5.4 CITY - ST - ZIP	
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · · · · · · · · · · · · · · · · · ·	1 1 0 E 440 07/09/2 CL 14 Old to 14 discovered that the information

14. Thereby 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 12 or Block 13 if changed, or on an attachment with an address.

CICNATURE.

11/1/1

2-10-98