

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000061693**

1. Corporation Name

RX FOR LAWNS, INC.

Principal Place of Business

Mailing Address

8329 Grampell Drive
Jacksonville, FL. 32221

8329 Grampell Drive
Jacksonville, FL. 32221

2. Principal Place of Business

2a. Mailing Address

21 5065-1 St. Augustine Rd

26 5065-1 St. Augustine Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
23 Jacksonville, Florida

27 City & State
28 Jacksonville, Florida

24 Zip 32207

25 Country US

29 Zip 32207

30 Country US

3. Date Incorporated or Qualified
7-1-95

3a. Date of Last Report

4. FEI Number
59-3323267

Applied For
Not Applicable

5. Certificate of Status Desired

☒ 25

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

David A. Romero
8329 Grampell Drive
Jacksonville, FL. 32221

81 Name James A. Bistrow

82 Street Address (P.O. Box Number is Not Acceptable)
5065-1 St. Augustine Road

83

84 City Jacksonville, Florida FL 85 Zip Code 32207

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 office or registered agent, or both, in the State of Florida. If a 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

James A. Bistrow

James A. Bistrow, Secretary/Treasurer

4/3/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President/Director ☒ DELETE
NAME David A. Romero
STREET ADDRESS 8329 Grampell Drive
CITY-ST-ZIP Jacksonville, FL. 32221

1.1 TITLE President/Vice-President/D ☐ Change ☒ Addition
1.2 NAME Georgia A. Bistrow
1.3 STREET ADDRESS 4305 Gadsden Court
1.4 CITY-ST-ZIP Jacksonville, FL. 32207

TITLE V. President ☒ DELETE
NAME William E. Amacker
STREET ADDRESS 4821 Prince George Drive
CITY-ST-ZIP Prince George, VA. 23875

2.1 TITLE Secretary/Treasurer/D ☐ Change ☒ Addition
2.2 NAME James A. Bistrow
2.3 STREET ADDRESS 4305 Gadsden Court
2.4 CITY-ST-ZIP Jacksonville, FL. 32207

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

James A. Bistrow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Bistrow, Secretary/Treasurer

4/3/96

Date

Daytime Phone #

CR2E034 (12/95)