## 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 # P9500064089 (2)

HANLEY LANDSCAPE MAINTENANCE, INC.

Country

9. Name and Address of Current Registered Agent

Principal Place C	of E	Business
3274 °D° ROAD		

2. Principal Place of Business

MEROLA, JAMES R

Suite, Apt. #, etc

City & State

21

22

23

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Žιρ

Mailing Address

2a. Mailing Address

City & State

Zip

Suito, Apt #, etc.

26

28

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3274 "D" ROAD LOXAHATCHEE FL 33470

## FILED Apr 21 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent

08/18/1995

65-0605625

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

11380 PROSPERITY FARMS ROAD SUITE 204			82	2 Street Address (P.O. Box Number is Not Acceptable)						
			83							
			84	City	FL	85	Zip C	ode	$\dashv$	
11. Pursuant office or ragent La	to the provisions of Sections 607.0502 and 607.15 egistered agent, or both, in the State of Florida. Si m familiar with, and accept the obligations of, Sec	08, Florida Statutes, uch change was aut tion 607.0505, Floric	the above horized by la Statutes	e-named the corp s.	corporation submits this statement for the purpose operation's board of directors. I hereby accept the app	changi ointmer	ing its nt as m	registe egister	ered ed	
SIGNATURE	Signature, typed or printed name of registered agent and title it appli	ANOTE B	Coetarad An	not eigenatura	required when reinstaling) DATE				_	
12.	OFFICERS AND DIRECTOR		13.	on signalize	ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS	IN 12	<u>-</u>	
THTLE	D	DELETE	1.1 TITLE			Cha		☐ Adı		
NAME	HANLEY, MICHAEL W		1.2 NAME							
STREET ADDRESS	3274 "D" ROAD		1.3 STREET	ADDRESS					[ ]	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		1.4 CITY - S	ĭ-z∤P						
TITLE	D	DELETE	2.1 TITLE			☐ Cha	nge	Add	dition (	
NAME	SHAIN, DON		2.2 NAME							
STREET ADDRESS	3274 "D" ROAD		2.3 STREET	ADDRESS					ì	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		2. 4 CITY - S	ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE			Cha	nge	Add	dition	
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STREET ADDRESS			4.3 STREET	address					- 1	
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NAME			5.2 NAME							
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NAME			62 NAME							
STREET ADDRESS			63 STAEET	ADDRESS						
CITY-ST-ZIP			64 CITY - S							
indicated officer or i	on this annual report or supplemental annual repo	ort is true and accura te empowered to exe	ate and thi	at my sia	id in Section 119.07(3)(i), Florida Statutes. I further canature shall have the same legal effect as if made un required by Chapter 607, Florida Statutes; and that r	der oath	h: that	I am a	an Í	

Country

**61** Name

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