

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000066342 (3)

1. Corporation Name

SUNCOAST IRRIGATION AND LANDSCAPE, INC.



Principal Place of Business

Mailing Address

1206 SYKES ROAD
PALM BAY FL 32905

1206 SYKES ROAD
PALM BAY FL 32905

3. Date Incorporated or Qualified

08/07/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip 32909

Country

28 Zip 32909

Country

4. FEI Number

59-3161730

Applied For
Not Applicable

5. Certificate of Status Desired

\$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

RUSSELL, DANNY F
2551 CLINTON DRIVE NE
PALM BAY FL 32905

81 Name

O'LEARY, JAMES P.

82 Street Address (P.O. Box Number is Not Acceptable)

1206 SYKES Rd.

83

84

City PALM BAY

FL

85 Zip Code 32909

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. 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

James P. O'Leary VTD

(NOTE: Registered Agent signature required when reinstating)

Date

7-19-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSD
NAME RUSSELL, DANNY F
STREET ADDRESS 2551 CLINTON DRIVE NE
CITY-ST-ZIP PALM BAY FL 32909

DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP 32905

Change Addition

TITLE VTD
NAME O'LEARY, JAMES P
STREET ADDRESS 1206 SYKES ROAD
CITY-ST-ZIP PALM BAY FL 32905

DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP 32909

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

Change Addition

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James P. O'Leary JAMES P. O'LEARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-19-96

Date

407 7688077

Business Phone