

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northcutt
Secretary of State
Division of CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # [REDACTED] (7)
TNT-Lawn Care, Inc.

995000085536

Principal Place of Business
210 Las Palmas St.
R.P.B. Fl. 33411

Mailing Address
P.O. Box 211292
R.P.B. Fl. 33421

1 Principal Place of Business
26 Mailing Address
27 City & State
28 City & State
29 City & State
30 Country

31 Date Incorporated or Chartered
11-3-95

32 Date of Last Report

4 Filing Number
65-0632166

5 Applied Fee (See Application)

6 Certificate of Status Required \$8.78 Additional Fee Required

7 Election Campaign Financing Fund Contribution \$5.00 May Be Added to Fees

8 This corporation has liability for Intangible Tax under s. 199.012, Florida Statutes Yes No

9 Name and Address of Current Registered Agent

10 Name and Address of New Registered Agent

Tim C. Thomasson
210 Las Palmas St.
R.P.B. Fl. 33411

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City
65 State
66 Zip Code

11 I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and that the information furnished herein is true and correct. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 007.0505, Florida Statutes.

12 OFFICERS AND DIRECTORS

121 TITLE
P. VP

122 NAME
Thomasson, Tim C.

123 STREET ADDRESS
210 Las Palmas St.

124 CITY, ST. ZIP
R.P.B. Fl. 33411

125 TITLE
SIT

126 NAME
Mackey, Thomas C.

127 STREET ADDRESS
754 Buttonwood Lane

128 CITY, ST. ZIP
Bayside Beach Fl. 33436

13 ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

131 TITLE Change Addition

132 NAME

133 STREET ADDRESS

134 CITY, ST. ZIP Change Addition

135 TITLE Change Addition

136 NAME

137 STREET ADDRESS

138 CITY, ST. ZIP Change Addition

139 TITLE Change Addition

140 NAME

141 STREET ADDRESS

142 CITY, ST. ZIP Change Addition

143 TITLE Change Addition

144 NAME

145 STREET ADDRESS

146 CITY, ST. ZIP Change Addition

147 TITLE Change Addition

148 NAME

149 STREET ADDRESS

150 CITY, ST. ZIP Change Addition

800002179588
-05/15/97--01028--030
***165.00

Handwritten signature and date: 5/6/97

SIGNATURE: [Handwritten Signature]
I hereby certify that the information supplied with this filing does not qualify for the exemption applied in Section 199.012(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 registered agent or former agent employed to execute this report as required by Chapter 007, Florida Statutes, and that my name appears in Block 12 or Block 13 (if change) or on an attachment with an address.

4/29/97 561.798.2053
0207012