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 # P9600001932 (8)

FLORIDA GARDENS & LANDSCAPE OF OSPREY, INC.

FILED Feb 03 1998 8:00am Secretary of State

Principal Place P O BOX 35- OSPREY FL	•	Mailing Address P O BOX 354 OSPREY FL 34229			DO NOT WRITE IN T	
					3. Date Incorporated or Qualified	
					01/02/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
Suite Apr. # etc		26		65-0651776	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		C Floring Councils Singuistics		
23	v	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Z ₁ p Country			8. This corporation owes or has paid th	
24	25	29	30		Personal Property Tax due June 30.	Z Yes No
	9. Name and Address of Cur		1		10. Name and Address of New Registe	ered Agent
DA	NIEL PREWETT		81	Name		
	77 BONEVA RD. S.		82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
	RASOTA FL 34233					
			83			
			84	City		85 Zip Code
				O.1.y		FL S Zip Code
SIGNATURE	Signature, typed or printed name of registered OFFICERS /	agent and title if applicable (NO	OTE: Registered Ager	ni signature requi	ored when reinstaling) ADDITIONS/CHANGES, TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITCE		Pres, U. Pres Ley Tres	Change Addition
NAME	WEBSTER, KITTY L		1.2 NAME	'	1, - 11-0 20- 4 70	
STREET ADDRESS P O BOX 354 N/A		1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	OSPREY FL 34229		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME						
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE	DELETE DELETE		31 TITLE			L Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET			
CITY-ST-ZIP			3.4. CITY-S	(- ZIP		Charge F Later-
TITLE		L.J DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME	• DDDT-CC		
STREET ADDRESS			4.3 STREET A			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST 5.1 TITLE	- zir		☐ Change ☐ Addition
NAME			5.2 NAME			L answer L reduitor
STREET ADDRESS			5.3 STREET	ADORESS		
CITY-ST-ZIP			5.4 CITY - ST			
TITLE		DELETE	6.1 TITLE	-"		☐ Change ☐ Addition
NAME		_	6.2 NAME			
STREET ADDRESS			6 3 STREET A	ADDRESS		
CITY-ST-ZIP			64 CITY-ST	1		
	ertify that the information supplied	with this filing does not qualify			Section 119 07(3)(i). Florida Statutes, Lfurth	er certify that the information

4. I be by 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.

CIONATURE TO

He L. W. Olo Co

14/88 C9417966-16