

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
97 FEB 26 PM 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000018288 (6)

1. Corporation Name

A & L LAWN CARE, INC.

Principal Place of Business

2953 BYINGTON PLACE  
TALLAHASSEE FL 32303

Mailing Address

2953 BYINGTON PLACE  
TALLAHASSEE FL 32303-2508

3. Date Incorporated or Qualified  
02/28/1996

3a. Date of Last Report  
2/28/97

2. Principal Place of Business

21 P.O. Box 3882  
Suite, Apt #, etc.

2a. Mailing Address

26 P.O. Box 3882  
Suite, Apt #, etc.

4. FEI Number

59-3369131

Applied For

Not Applicable

22 City & State

Tallahassee

27 City & State

Tallahassee

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

23 Zip

32315

Country

25 LEON

28 Zip

32315

Country

30 LEON

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DANIEL, LONNIE E  
2953 BYINGTON PLACE  
TALLAHASSEE FL 32303

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 *Lonnie E. Daniel* *Lonnie E. Daniel*

DATE

2/27/97

12. OFFICERS AND DIRECTORS

TITLE *Pres.* ☐ DELETE

NAME *ARTHUR B. DANIEL*  
STREET ADDRESS *2953 Byington Pl.*  
CITY - ST - ZIP *Tallahassee FL 32303*

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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14. I do hereby 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.

SIGNATURE: *Arthur B. Daniel* *Arthur B. Daniel* 2/26/97 562-7209

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0046888

CR2E034 (9/96)