FILED Apr 22, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000033502

1. Corporation Name

DAVID Z	OUR LAWN SERVICE, INC	•										
Principal Place	of Business	М	ailing Address								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1040 BACON AVENUE 1040 BACON AVENUE												
SARASOTA FL 34232 SARASOTA FL 34232								DO NOT WRITE IN THIS SPACE				
us *								3. Date Incorporated or Qualifed				
								04/15/1996		-,		
2. Principal Pl	ace of Business	2a	. Mailing Address					4. FEI Number	L	<del>- · · ·</del>	lied For	
11		26		_				65-0663551			Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired — — \$8.75 Additional Fee Required				
City & State		27	City & State	_				6. Election Campaign Financing	<u>\$5</u>	.00 N	lav Be	
13	•	28						Trust Fund Contribution		ided to		
Zip	Country		Zip	Cou	intry			8. This corporation owes the current year Ir			_	
24	25	29	30					Personal Property Tax.	X Yes	; [	No	
: 11,	9. Name and Address of Curre	nt Regis	stered Agent					10. Name and Address of New Registered	Agent			
					81	Name						
DAVID ZOOK 1040 BACON AVENUE					82	Street	Addre	ss (P.O. Box Number is Not Acceptable)				
SARASOTA FL 34232					83							
J												
					84	City		FI	85	Zip Co	ode	
-#i	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag	of Flori ations of	ida. Such change was a f, Section 607.0505, Flo	utnorizeo orida Stat	utes	tne corp.	oration	ration submits this statement for the purpose of submits this statement for the purpose of submits board of directors. I hereby accept the appointment of the purpose of th		as regi		
12.	OFFICERS A			13.				ADDITIONS/CHANGES TO OFFICERS A	ND DIR	ECTOF	S IN 12	
TITLE	D		☐ DELETE	1.1 TI	TLE			•	Ch	ange	Addition	
NAME	ZOOK, DAVID			1.2 N	AME		′				}	
STREET ADDRESS	1040 BACON AVENUE			1.3 \$	TREET	ADDRESS						
CITY-ST-ZIP	SARASOTA FL 34232			1.4 C	ITY-S1	T-ZIP						
TITLE			☐ DELETE	2.1 Π	ITLE				Ch	ange	☐ Addition	
NAME				2.2 N	AME		ŀ					
STREET ADDRESS				2.3 S	TREET	ADDRESS					1	
C/TY-ST-ZIP	-			2.40	CITY-S	T-ZIP	<u> </u>					
TITLE			☐ DELETE	3.1 TI	ITLE				Ch	ange	☐ Addition	
NAME	·			3.2 N	AME						}	
STREET ADDRESS				3.3 S	TREET	TADDRESS	1				1	
CITY-ST-ZIP				3.4. 0	ΠY-S	T-ZIP						
TITLE		_	☐ DELETE	4.1 Ti	TLE				Ch	ange	☐ Addition	
NAME				4.21	VAME		1				_	
STREET ADDRESS				4.3 S	TREE	ADORESS					·	
CITY-ST-ZIP				4.4 C	πy-s	T-ZIP	<u> </u>		/mm +:			
TITLE			☐ DELETE	5.1 T			1		CH	ange	Addition	
NAME				5.2 N				•				
STREET ADDRESS						TADDRESS	İ					
CITY-ST-ZIP					TY-S	T-ZIP	<u> </u>				- Addition	
TITLE			☐ DELETE	6.1 T	IILE				☐ Ch	quige	☐ Addition	

CITY-ST-ZIP 14. I 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 principle of the corporation of the receiver of trustee empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS