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FILED
May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000034780 (2)

1. Corporation Name

WARREN'S TURF GROUP, INC.

Principal Place of Business

505 SOUTH FLAGLER AVENUE STE 606
WEST PALM BEACH FL 33401

Mailing Address

505 SOUTH FLAGLER AVENUE STE 606
WEST PALM BEACH FL 33401-5923

3. Date Incorporated or Qualified
04/22/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

Country

4. FEI Number

65-0659887

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

PANZL, JOSEPH R
390 NO. ORANGE AVENUE STE 600
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

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

1200 South Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

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, to 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

PETER F. SOUZA
ASSISTANT SECRETARY

(Not required for agent signature required when reinstating)

DATE

2/12/97

12. OFFICERS AND DIRECTORS

TITLE S ☐ DELETE
NAME Woerner, George A.
STREET ADDRESS HWY 87 No
CITY-ST-ZIP Elberta, AL

TITLE P ☐ DELETE
NAME WOERNER, LESTER J.
STREET ADDRESS 2221 AMESBURY CT.
CITY-ST-ZIP WELLINGTON, FL

TITLE S ☐ DELETE
NAME WOERNER, EDWARD E.
STREET ADDRESS HWY 87 NO
CITY-ST-ZIP ELBERTA, AL

TITLE VP ☐ DELETE
NAME WOERNER, LARRY J.
STREET ADDRESS HWY 87 NO
CITY-ST-ZIP ELBERTA, AL

TITLE VP ☐ DELETE
NAME WOERNER, ROGER L.
STREET ADDRESS 7432 HONEYSUCKLE DR
CITY-ST-ZIP SEBRING, FL

TITLE VP ☐ DELETE
NAME WOERNER, EDWARD J
STREET ADDRESS 26386 WOERNER RD
CITY-ST-ZIP ELBERTA, AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Assist. Sec. ☐ Change ☐ Addition
1.2 NAME Miller, Kathy T.
1.3 STREET ADDRESS 1016 SE 3rd Street
1.4 CITY-ST-ZIP Belle Glade, FL 33430

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0295794

CR2E034 (9/96)

Kathy T. Miller Assistant Secretary 4-9-97 (561) 835-3747