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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

**FILED** 

May 04 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS** 

**19**98

P96000039134 (7) DOCUMENT #

JEFFS LAWN SERVICE, INC.

Principal Place of Business Mailing Address 208 MICHAEL AVE. 206 MICHAEL AVE. MARY ESTHER FL 32569 MARY ESTHER FL 32569 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For -<del>59 3375051</del> 65-0668319 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible ☐ No 24 25 X Yes 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent TUCKER, JEFFERY C **B1** Name 206 MICHAEL AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MARY ESTHER FL 32569 83 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 Signature, typed or printed name of registered agont and title if applicable (NOTL: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PTD TITLE DELETE Change 1.1 TITLE Addition TUCKER, JEFFERY C NAME 1.2 NAME 206 MICHAEL AVE. STREET ADDRESS 1.3 STREET ADDRESS MARY ESTHER FL 32569 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition TUCKER, DEBORAH L NAME 22 NAME **206 MICHAEL AVE.** STREET ADDRESS 23 STREET ADDRESS MARY ESTHER FL 32569 CITY+ST-ZIP 2 4 CiTY-ST-ZIP DELETE TITLE 3.1 TITLE Change ☐ Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C(TY - \$1 - ZIP DELETE Change 4.1 TITLE TITLE Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 61 TITLE Change Addition NAME 62 NAME

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 on an attachment with an address

6.4 CITY - ST - ZIP

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP