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Mar 28 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 # P96000041128 (5)

1. Corporation Name  
HORTI-CARE, INC.



Principal Place of Business: 3460 SANDPIPER LANE MULBERRY FL 33860  
Mailing Address: 3460 SANDPIPER LANE MULBERRY FL 33860-9215

3. Date Incorporated or Qualified: 05/14/1996  
3a. Date of Last Report: [Blank]  
4. FEI Number: 59-3371921  
Applied For: [Blank] / 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  
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [X] Yes [ ] No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: [Blank] 22 City & State: [Blank] 23 Zip: [Blank] Country: [Blank]  
2a. Mailing Address: 26 Suite, Apt. #, etc.: [Blank] 27 City & State: [Blank] 28 Zip: [Blank] Country: [Blank]

9. Name and Address of Current Registered Agent  
STELITANO, RICHARD A  
3460 SANDPIPER LANE  
MULBERRY FL 33860

10. Name and Address of New Registered Agent  
81 Name: [Blank]  
82 Street Address (P.O. Box Number is Not Acceptable): [Blank]  
83 [Blank]  
84 City: [Blank] FL 85 Zip Code: [Blank]

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: *Richard Stelitano* (NOTE: Registered Agent signature required when reinstating) DATE: 3/17/97

12. OFFICERS AND DIRECTORS

TITLE	D	DELETED
NAME	STELITANO, RICHARD A	
STREET ADDRESS	3460 SANDPIPER LANE	
CITY - ST - ZIP	MULBERRY FL 33860	
TITLE	D	DELETED
NAME	NORRIS, WILLIAM H	
STREET ADDRESS	3460 SANDPIPER LANE	
CITY - ST - ZIP	MULBERRY FL 33860	
TITLE	D	DELETED
NAME	MORLOCK, STEVEN M	
STREET ADDRESS	3460 SANDPIPER LANE	
CITY - ST - ZIP	MULBERRY FL 33860	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change [ ] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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: *Richard Stelitano* SIGNATURE REQUIRED: *Richard Stelitano* DATE: 3/17/97 DAYTIME PHONE #: 941-647-3290

CR2E034 (9/96)