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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600041952 (8)
PROPERTY MAINTENANCE OF MARTIN COUNTY, INC. P96000041952 (8)

FILED Mar 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- I TOBILOCI DEN TOTA DITAL SEAR BORR DO	ilio doini diabi inein isidi di	/11 4 1181 188 1
3766 SE OCEAN BLVD STUART FL 34996 US		3766 SE OCEAN STUART FL 34996 US			DO NOT WRITE	E IN THIS SPACE	
					3. Date Incorporated or Qualified 05/09/1996	IN THIS STACE	
9 Principal P	lace of Business	2a. Mailing Addres			4. FEI Number		
21					65-0566472		pplied For
Suite, Apt #, etc		Suite, Apt #, etc.			00 0000472		ot Applicable
22		27			5. Certificate of Status Desired		Additional equired
City & State		City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip Country		Zip	Country		8. This corporation owes or has pa	id the current year in	tangible
24	25	29	30		Personal Property Tax due June		☐ No
A.1.	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
	DREWS, CHARLES S JR.			81 Name			
3766 SE OCEAN BLVD STUART FL 34996				82 Street Addr	ress (P.O. Box Number is Not Acceptab	ole)	
511	DARI FL 34996				· · · · · · · · · · · · · · · · · · ·		
				63		•	
				84 City		- 85 Zip	Code
de Bulling	10 000 00	7.6 7.1 7.5 7.5 F					
office or re	to the provisions or Sections 607.05 egistered agent, or both, in the State	02 and 607 1508, Norida e of Florida. Such change	i Statutes, the a e was authorize	ove-named corp toy the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	surpose of changing it of the appointment as	ts registered registered
agent. I a	m familiar with, and accept the obliq	jations of, Section 607.05	505, Florida Stat	utes.		A the appearance as	109,010,00
SIGNATURE							
12.	Signature, typed or proted name of registered a:	port and little if applicable VD DIRECTORS	(NOTL Registere	d Agent signature requir		DATE	
TITLE	P	DELE		0.5	ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	ANDREWS, CHARLES S	beec	1.2 N/			Change	Addition
STREET ADDRESS	3766 SE OCEAN BLVD		· ·				
1	STUART FL			REET ADDRESS			
CITY - ST - ZIP TITLE		DELE		IY-\$T-ZIP	7-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	☐ Change	☐ Addition
NAME		beer	22 N/			LJ Change	LJ Addition
STREET ADDRESS			1				
CITY-ST-ZIP			4	REET ADDRESS	•	4.5	
TITLE		DELE		TY-ST-ZIP		Change	Addition
NAME			3.1 II.			C Change	L.J Addition
STREET ADDRESS				REET ADDRESS			
CITY - ST - ZIP				TY-ST-ZIP			
TITLE		☐ DELE				Change	☐ Addition
NAME			4.2 N			onange	radition
STREET ADDRESS				REET ADDRESS			
City-St-ZiP				Y-ST-ZIP			
TIFLE		DE LE			7.1.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	☐ Change	Addition
NAME			5.2 NA			in Authorite	
STREET ADORESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			į
TITLE		DELE				Change	Addition
NAME		<u></u>	6.2 NA	1		- Citaligo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS				REET ADDRESS			
CITY+ST-ZIP							
dd thereby a			0.4 CI	Y-ST-ZIP			

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 eath; that I am an officer or director of the corporation or the receiver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes for on an attachment with an address.