Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90158 041 \*\*\*150.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000045035

1. Corporation Name

TITLE

NAME

STREET ADDRESS

ALTAR LANDSCAPING AND MAINTENANCE, INC.

Principal Place of Business Mailing Address						1 1991)981 Ha 1910 91H1 98H 98H	2011: 82111 BIE21 21111 G	E105 11101 Bill 1401	
127 KAROLA DRIVE 127 KAROLA DRIVE SEBRING FL 33870 SEBRING FL 33870									
A CONTROL OF THE CONT					<b>.</b>	DO NOT WRITE IN THIS SPACE			
						3. Date incorporated or Qualified			
Principal Place of Business Za. Mailing Address					4.	. FEI Number		Applied For	
21 26						65-0680356		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	. Certifcate of Status Desired	7	5 Additional	
22		27						Required	
City & State	9	City & State	1			Election Campaign Financing	1 1 7 -	00 May Be	
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	_ Counti	ry	8.	. This corporation owes the currer			
24	25 29 30			Personal Property Tax. ▶ Yes No					
	9. Name and Address of Current	Registered Agent	8	1 Name	10	. Name and Address of New Re	gistered Agent		
DIDENOLID CEODCE &									
RIDENOUR, GEORGE M 127 KAROLA DRIVE				2 Street Ad	ddress (i	dress (P.O. Box Number is Not Acceptable)			
SEBRING FL 33870			8	3	,		<del>`</del> _		
				4 City	-		85 Z	Zip Code	
{	- 1	1 - 7			FL   "   _				
office or re agent. I as	to the provisions of Sections 607 0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was autr ons of, Section 607.0505, Florid	a Statute	es.	ration's b	oard of directors. I hereby accept	the appointment as	registered	
	Signature, typed or printed name of registered agent a		13.	ent signature req		ADDITIONS/CHANGES TO OFFI		CTORS IN 12	
12.	3111027.57.12		1.1 TITLE	: 1		Application	Chan		
TITLE			1.2 NAME				_	_	
NAME	127 KAROLA DRIVE								
STREET ADDRESS			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				•		
CITY-ST-ZIP	SEBRING FL 33870	☐ DELETE					[ ] Chan	ge Addition	
III/TE .	DIDENOUD CEODOE M	C. Decere	2.1 1111.E		-		,°'		
NAME	RIDENOUR, GEORGE M		2.2 NAME						
STREET ADDRESS	127 KAROLA DRIVE		R.	ET ADDRESS		•			
CITY-ST-ZIP	SEBRING FL 33870	☐ DELETE	2.4 CITY	<del></del>			Chan	nge Addition	
TITLE		□ vcre1e	3.1 TITLE						
NAME			3.2 NAMI	1		•			
STREET ADDRESS				ET ADDRESS				ļ	
CITY-ST-ZIP		☐ DELETE	3.4. CITY				Chan	nge Addition	
TITLE	•	, DELETE	4.1 TRTLE				iii olean	- U,,aa	
NAME			4. 2 NAM						
STREET ADDRESS				ET ADDRESS				}	
CITY-ST-ZIP	<u></u>	DELETE .	4.4 CITY				☐ Char	nge Addition	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAM			•		.a.	
NAME			1	1		•	•	\	
STREET ADDRESS				ET ADDRESS				j	
CITY-ST-ZIP			5.4 CITY	-31-ZP					

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 suppliemental 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

Change

Addition