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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056833 (2)

C & C LAWN MAINTENANCE, INC.

Oricoval Pian	o al Rusinone	Moiling Address					
Principal Place of Business Mailing Address 124 WOODLANDS ROAD PALM SPRINGS FL 33461 PALM SPRINGS FL 33461			1063				
					3. Date Incorporated or Qualified 07/01/1996	Sa. Date of Last	t Report
·····	ace of Business	2a. Mailing Address			4. FEI Number	1	Applied For
Suite, Apt	# etc.	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	65-0694743	60 70	Not Applicable 5 Additional
22		27			5. Certificate of Status Desired	7	Required
City & State	0	City & State			6. Election Campaign Financing		0 May Be
23 Ζιρ	Country	28 Zip	Country		Trust Fund Contribution 8. This corporation has liability for		to Fees
24	25	29	30		Florida Statutes [Yes No	3. 100.002,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
	I, RONALD M		81	Name			
	WOODLANDS ROAD M SPRINGS FL 33461		82	Street Add	dress (P.O. Box Number is Not Acceptal	ole)	
PAL	M SCHINGS PL 33401		83			<u>, , , , , , , , , , , , , , , , , , , </u>	
			84	City		85 Z	ip Code
			ĺ	· ·		FL	
SIGNATURE	Stgruturi, typnd or printed name of registered ag	ent and title if applicable. (NOT	E: Registered Age		rporation submits this statement for the lation's board of directors. I hereby acce	DATE	
12.	PD OFFICERS AN	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	***
TITLE NAME	OEN, RONALD M	L DELLIC	1.1 THEE	\$		C Chang	a [] Kodinon
STREET ADDRESS	124 WOODLANDS ROAD		1.3 STREET	ADDRESS			
CHY-ST-ZIP	PALM SPRINGS FL 33461		1.4 CITY - 5	7 - ZIP			
TITLE	STD	☐ DELETE	2.1 ₹rTL€			☐ Chang	e
NAME STREET ADDRESS	OEN, SHERRY L 124 WOODLANDS ROAD		2.2 NAME 2.3 SYREET	Annocco			
City - S1 - ZIP	PALM SPRINGS FL 33461		2.3 STREET			\$1.00 miles	
THE		☐ DELETE	3.1 TITLE			Chang	ge 🔲 Addition
NAME	 -		3.2 NAME				
STREET ADDRESS	·		3.3 STREET	ļ.			
CITY - ST - ZIF!		DELETE	3.4. CITY - 4.1 TITLE	51-ZIP		Chang	e Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADORESS			
CITY-ST-ZIF		T DELETE	44 CITY-8	ST-ZIP		T Observe	a delition
TITLE		☐ DELETE	51 TITLE 52 NAME	İ		L.) Chang	ge L Addition
NAME STEET ADDRESS			5.3 STREET	ADDRESS			
CHY-ST-ZIP			5.4 CITY - 9				
TITLE		☐ DELETE	6.1 TITLE			Chang	ge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
14. I do here!	ov certify that the information supplie	ed with this filing does not qual	6.4 CITY-S		ed in Section 119.07(3)(i), Florida Statute	as. I further certify the	nat the
informatio	ri indicated on this annual report or flicer or director of the corporation o n Block 12 or Block 12 if shanged, o	supplemental annual report is the receiver or trustee empoy	true and accivered to execute displayment of the second according to the secon	urate and the cute this repo	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as if made	under oath; tha

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

4/10/97 (561)434-107

FILED

May 14 1997 8:00am

Secretary of State