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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600063883 (8)

TOTAL GROUND MAINTENANCE, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4528 COMMANDER DRIVE APT 2013 POST OFFICE BOX 533480 OFLANDO FL 32822 ORLANDO FL 32853-3480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/29/1996 2a. Mailing Address 2. Principal Place of Business 4. FEt Number Applied For 21 26 59-3404811 Not Applicable Sulte, 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 Trust Fund Contribution Added to Fees 28 Zip Country Žιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SELIGSON, ROBERT S 4528 COMMANDER DRIVE APT 2013 82 Street Address (P.O. Box Number is Not Acceptable) 3130 CARISUDO CT. ORLANDO FL 32822 83 City Zip Code **328/2** 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. I am familiar with, and accept the ellipsations of Section 607.0505, Florida Statutes. 84 Registered Agoril signature required when reinstating) OFFICERS AND DIRECTORS 6 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE **C**hange TITLE 11 TITLE Addition SELIGSON, ROBERT S NAME 1.2 NAME **72E034** CARISHDO 3/30 4528 COMMANDER DRIVE APT 2013 STREET ADDRESS 1.3 STREET ADDRESS Orlando FL 32822 ORLANDO, FL 32812 CITY-ST-ZIP 1,4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CiTY-S1-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C(1Y - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7/P DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP ☐ Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with indicated on this annual report or supplementate officer or director of the corporation or the receive Block 12 or Block 13 if changed out in an artische It this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information 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 over or typice compowered to exempte this report as required by Chapter 607, Florida Statutes; and that my name appears in