

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. McKam
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 03 1997 8:00am
Secretary of State

DOCUMENT # P96000069469 (0)

1. Corporation Name

STEVE BENNETT'S TREE SERVICE, INC.

Principal Place of Business

1936 N.W. 42ND PLACE
GAINESVILLE FL 32605

Mailing Address

1936 N.W. 42ND PLACE
GAINESVILLE FL 32605-1844



2. Principal Place of Business

21 AS Above

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

24

2a. Mailing Address

26 AS Above

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/16/1996

3a. Date of Last Report

4. FEI Number

59-3394055

Applied For

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

BENNETT, STEPHEN R
1936 N.W. 42ND PLACE
GAINESVILLE FL 32605

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, type or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
STEPHEN R. BENNETT
1936 NW 42nd Place
GAINESVILLE FLORIDA 32605

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
VICE-PRESIDENT
DAVID F. MCCONNELL
5301 NW 23rd Ave.
GAINESVILLE FLA.

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGER
TERRY MOUTCHENS
P.O. Box 1546
KEYSTONE HTS., FLA. 32656
6905 Deer Springs Road
Keystone Heights, Florida
32656

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
FLORIDA
32656

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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:

Signature

4/26/97 (252) 771-4937

CR2E034 (9/96)