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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # P

P96000104096 (8)

PROPERTY MAINTENANCE SERVICES, INC.

Mailing Address Principal Place of Business 2580 PLACIDA ROAD 2560 PLACIDA ROAD ENGLEWOOD FL 34224 ENGLEWOOD FL 34224 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1997 2a. Mailing Address Applied For 2. Principal Place of Business 65-071 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has pald the current year Intangible Country Zip Zip Personal Property Tax due June 30. Yes 30 25 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name PAULSEN, MILDRED J 2560 PLACIDA ROAD Street Address (P.O. Box Number is Not Acceptable) **ENGLEWOOD FL 34224** 83 City Zip Code 1. 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 of 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. mildred PAULSEN Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TILLE President TITLE mildred & PAULSEN NAME PAULSEN, MILDRED J 1.2 NAME STREET ADDRESS 2560 PLACIDA ROAD 1.3 STREET ADDRESS ENGLEWOOD FL 34224 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE PAULSEN, SCOPPER 2.2 NAME NAME 2560 PLACIDA ROAD 2.3 STREET ADDRESS STREET ADDRESS ENGLEWOOD FL 34224 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE FRANK, PATRICIA 3.2 NAME NAME 716 CRESTWOOD ROAD 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP **ENGLEWOOD FL 34223** CITY-ST-ZIP ☐ Change DELETE Addition 4.1 TITLE TITLE CONOVER, RANDY 4.2 NAME STREET ADDRESS **CADDY ROAD** 4.3 STREET ADDRESS ROTUNDA WEST FL 33946 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Channe DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 200002438552 -02/24/98--01008--035 DELETE 61 TITLE Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS ***150.00

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 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.

CIGNATURE WALL OF LEAST

2-13-98

CR2E034 (10/97)

FILED

Feb 23 1998 8:00am

Secretary of State