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

Mailing Address

MILTON FL 32572

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

POST OFFICE BOX 899

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

3356 VILLAGE GREEN DRIVE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

PACE FL 32571

21

22

23



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000004292** 1. Corporation Name

Country

INDUSTRIAL GROUNDS MAINTENANCE, INC.

Zip ₽No. Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MITCHELL, WILLIAM R Street Address (P.O. Box Number is Not Acceptable) 220 WEST GARDEN ST. SUN TRUST TOWER 9TH FLOOR 83 PENSACOLA FL 32501 Zip Code 84 City 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 (NOTE: Registered Agent signature required when reinstating); Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. ☐ Addition DELETE 1.1 TITLE 난 원이 163일 TITLE 12 NAME BROWNING, H. GAYLE NAME 3356 VILLAGE GREEN DR 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY-ST-ZIP PACE FL 32571 CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE 2.2 NAME BROWNING, ROBERT W. NAME 2.3 STREET ADDRESS 3356 VILLAGE GREEN DR STREET ADDRESS 2. 4 CITY-ST-ZIP PACE FL 32571 CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE VP00 TITLE 3.2 NAME MOULDER, R. JASON **56 TUSCARORA DR** 3.3 STREET ADDRESS STREET ADDRESS **BEAUFORT SC 29902** 3.4. CITY-ST-ZIP CITY-ST-ZIP Change: Addition ☐ DELETE 4 1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADORESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

Country

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

☐ DELETE

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 or part attachment with an address, with all other like empowered.

☐ Change

☐ Change

☐ Addition

Addition

FILED

Feb 12, 1999 8:00am

**Secretary of State** 

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

01/10/1997

59-3422692

4. FEI Number

02-12-1999 90023 039 \*\*\*158.75

CR2E034 (11/98)