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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mòrtham "

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000010336 (0)

CERTIFIED ENVIROSCAPES, INC.

FILED Mar 05 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			()	1811 90189 (1190 11118 0111 1991
24280 S. TAMIAMI TRAIL 24280 S. TAMIAMI TRAIL					
BONITA SPRINGS FL 33923 BONITA SPRINGS FL 33923			DO NOT WOITE IN THE	C CDACE	
				DO NOT WRITE IN THI 3. Date Incorporated or Qualified	5 SPACE
				· 1	
2. Principal Place of Business	2a. Mailing Address			02/03/1997 4. FE! Number	Applied For
<u> </u>	26. Mailing Address			65-0728243	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip	Coun	try	8. This corporation owes or has paid the o	
24 25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
9, Name and Address of Curr		1		10. Name and Address of New Registers	d Agent
SMITH, WILLIAM R		16	Name		
8191 COLLEGE PARKWAY		l-	Ctroot Add	cons (D.O. Boy Number is Not Acceptable)	
SUITE 300		l°	Street Add	ress (P.O. Box Number is Not Acceptable)	
FORT MYERS FL 33919		18	33		
TOTAL MILITO IE 00018		Ļ			
		16	City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607 0	502 and 607,1508. Florida Statutes	s, the abo	ve-named corr	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the Sla agent. I am familiar with, and accept the obl	te of Florida. Such change was au igations of, Section 607.0505, Flori	ithorized ida Statu	by the corporates.	tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE Signature, typed or printed name of registered a	gent and little if applicable (NOTE	Registered /	Agent signature requi	ired when reinstating) DATE	
	ND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITL	E		Change Addition
NAME KNIGHT, STEEVEN C		1.2 NAV	15		
STREET ADDRESS 24280 S. TAMIAMI TRAIL		1.3 STRI	EET ADDRESS		
CITY-ST-ZIP BONITA SPRINGS FL 33923	1	1.4 City	-ST-ZIP		
TITLE	DELETE	2.1 TITL			Change Addition
NAME		2.2 NAV	ie i		
STREET ADDRESS		2.3 STRI	EET ADDRESS		
CITY-ST-ZIP			Y-ST-ZIP		
TITLE	DELETE	3.1 TITU			Change Addition
NAME		3.2 NAM	ne l		
STREET ADDRESS		3.3 STR	EET ADORESS		
CITY-ST-ZIP			Y-ST-ZIP		
TITLE	DELETE	4,1 TITL			Change Addition
NAME		4. 2 NAN	ME		
STREET ADDRESS			ET ADDRESS		\
City-St-ZIP			'-ST-ZIP		\
TITLE	DELETE	5.1 TITLE			Change Addition
NAME		5.2 NAM	IE I		
STREET ADDRESS			EET ADDRESS		
CITY-ST-ZIP			'-ST-ZIP		
TITLE	DELETE	6.1 TITL			☐ Change ☐ Addition
NAME		6.2 NAM	i		<u> </u>
STREET ADDRESS		1	EET ADDRESS		
CITY-ST-ZIP			-ST-ZIP		
14. I hereby certify that the information supplied	with this filing does not qualify for	the even	aption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated on this annual report or supplement	tal amual report is true and accur	rate and	that my signatu	ire shall have the same legal effect as if made	under oath; that I am an

remain minual report is the and according and that my signature shall have the same legal effect as it made under dath, that I am excelver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in all the ment with an exclusion. officer or director of the corporation of the Block 12 or Block 13 if changed, or of an