PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

								Corporation Nan	1.
						a, inc.	/e groundskeeping	Cheative G	
	()5531551 110 1211 1221 4011 4411				Mailing Address	Mai	ce of Business	rincipal Place of B	Prir
WRITE IN THIS SPAC	DO NOT WRIT				1997 KAROLINA AVENUE WINTER PARK FL 32789		1997 KAROLINA AVENUE WINTER PARK FL 32789		
alifed	3. Date Incorporated or Qualifed 02/25/1997	-							
	4. FEI Number 59-3432794				2a. Mailing Address 26	<u>⊢</u>	Place of Business	Principal Place of	2.
red 🗀 \$8	5. Certifcate of Status Desired				Suite, Apt. #, etc.		. #, etc.	Suite, Apt. #, etc	
ncing · _ · · · . · \$	Election Campaign Financing - Trust Fund Contribution	,	•		City & State 28	·	te	City & State	-
e current year Intangible	This corporation owes the curre Personal Property Tax.			untry			Country	Zip	
New Registered Agent	10. Name and Address of New Ro	1		1			9. Name and Address of		241
			Name	81		<u> </u>	CHRAN, CRISTI J.		
cceptable)	Street Address (P.O. Box Number is Not Acceptable)					1997 KAROLINA AVE			
				83			ITER PARK FL 32789	WINTER	
FL 85			City	84					
- ·	ation submits this statement f 's board of directors. I hereby	porat ion's			502 and 607.1508, Florida Statutes, the te of Florida. Such change was authorize gations of, Section 607.0505, Florida Sta	607.0502 and 60 ne State of Florida ne obligations of,	registered agent, or both, in the am familiar with, and accept the	Pursuant to the office or registe agent. I am far	

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90120 013 ***150.00



nο	NOT	WRITE	IN THIS	SPACE
\sim	110	**!		01.700

Applied For Not Applicable \$8.75 Additional Fee Required

\$5.00 May Be

Added to Fees

□No

			\longrightarrow				11-3	. 0.4-	
			84	City		FL	85 Z	ip Code	
office or r	to the provisions of Sections 607.0502 an egistered agent, or both, in the State of Fl m familiar with, and accept the obligations	orida. Such change was au'i	tnorizea by t	named on the corporate	corporation submits this statement for ration's board of directors. I hereby ac	the purpose of cl ccept the appoint	nanging ment as	its registere registered	:d
SIGNATURE		****	5. 4.7		quired when reinstating)	DATE			}
	Signature, typed or printed name of registered agent and		13.	signature re	ADDITIONS/CHANGES TO		DIREC	TORS IN 12	$\overline{}$
12.	OFFICERS AND D	DELETE			ADDITIONS/CHANGES TO		Chang	10000	
TITLE	PSTD		1.1 TITLE					у Ш.	
NAME	COCHRAN, CRISTI J		1.2 NAME	ļ					
STREET ADDRESS	1997 KAROLINA AVENUE		1.3 STREET	ADDRESS					J
CITY-ST-ZIP	WINTER PARK FL 32789	<u> </u>	1.4 CITY-ST	-ZIP	- 1 to 1 to 1				
TITLE	VPST	☐ DELETE	2.1 TITLE				Chang	ge □ Add	lition
NAME	Dasher, Jennifer R.		2.2 NAME						
STREET ADDRESS	1997 KAROLINA AVE		2.3 STREET	ADDRESS					
CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-ST	r-ZIP					
TITLE		☐ DELETE	3.1 TITLE	-			Chang	ge 🗀 Add	ition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY-S1	F-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Chan	ge 🔲 Add	noitic
NAME	•		4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP		_	4.4 CITY-ST	-ZIP					
TITLE		☐ DELETE	5.1 TITLE				☐ Chan	ge 🗌 Add	dition
NAME		•	5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP		_	5.4 CITY-ST	-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Chan	ge ∐ Ado	dition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			6.4 CITY-ST						
14. I hereby	certify that the information supplied with the	is filing does not qualify for	the exemption	on stated	in Section 119.07(3)(i), Florida Statut	es. I further certif as if made under	fy that the	ne informatio	חנ

report of the corporation of 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 an attachment with an address, with all other like empowered.

SIGNATURE: