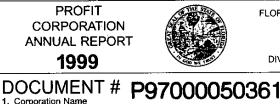
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

K. H. LAWN MAINTENANCE, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 07, 1999 8:00 am Secretary of State

05-07-1999 90099 035 ***150.00

Principal Place of Business Mailing Address						f SMBilMBs tra chtis taoit gorts oor))	4)(89)00 ((1)0 0	F1181 1181 1881		
8999 SE DELAWARE AVE HOBE SOUND FL 33455 HOBE SOUND FL 33455					DO NOT WRITE IN THIS SPACE						
							3	Date Incorporated or Qualifed			
								06/06/1997			
Principal Place of Business 2a. Mailing Address					4.	FEI Number		 	lied For		
21 26						<u>65-0759790</u>		<u> </u>	Applicable		
Suite, Apt. #, etc. Suite,			Suite, Apt	ite, Apt. #, etc.			5.	Certificate of Status Desired		\$8.75 Ac	I
City & State	Δ		City & Sta	ıte				Election Campaign Financing		\$5.00 N	May Bo
<u> </u>	C		28				"	Trust Fund Contribution		Added to	, ,
Zip	Cor	intry	Zip		Cour	ntrv	١,	This corporation owes the curre	ent vear Intar		
	25		29	30	_	,	0.	Personal Property Tax.			□No
24	1 1 1	dress of Current	1		7 1		10.	Name and Address of New R	egistered A	gent	
	3. Name and Ad	areas or ourrein	regional region			81 Name					
KIES	LING, ROBERT										
1	EXECUTIVE CENT	FR				82 Street Add	ress (F	O. Box Number is Not Accepta	ble)		
SUITE 209			-	83							
				03							
WEST PALM BEACH FL 33401				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.											registered istered
SIGNATURE											\
SIGNATORE	Signature, typed or printed			(NOTE: Re	_	Agent signature require			DATE		70 111 40
12.		OFFICERS AND			13.			ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	D			DELETE	1.1 TIT	LÉ				☐ Change	Addition
NAME	HOBBS, KENNETH E			1.2 NA	ME						
STREET ADDRESS			1.3 STI	REET ADDRESS					ļ		
CITY-ST-ZIP	HOBE SOUND F	L 33455			1.4 CIT	Y-ST-ZIP					
TITLE				DELETE	2.1 TIT	LE	-			Change	Addition
NAME					2.2 NA	ME					
STREET ADDRESS					2.3 ST	REET ADORESS					
CITY-ST-ZIP					2.4 CI	TY-ST-ZIP					
TITLE		•		DELETE	3.1 TIT	LE		 .		Change	☐ Addition
NAME					3.2 NA	ME					
STREET ADDRESS					3.3 ST	REET ADDRESS					
CITY-ST-ZIP					3.4. CI	TY-ST-ZIP					
TITLE				DELETE	4.1 TIT	LE				Change	Addition
NAME					4 2 NA	ME					

CITY-ST-ZIP 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, with all other like empowered.

4.3 STREET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETÉ

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

RORDINGTON Date H-26-99 561-546-1182

Addition

Addition

☐ Change

☐ Change