Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90042 013 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9700060425

1. Corporation Name GENESIS LANDSCAPING SERVICES, INCORPORATED									
Principal Plac	e of Business	Mailing Address				I SOUTH BUT THE TOTAL COURS COURS CONTINUES	1 BB FIO DIEL DBIE DIELE		
3210 HWY. 390 PANAMA CITY		3210 HWY. 390 Panama City FL 3245				DO NOT WRITE IN	THIS SPACE		
						3. Date Incorporated or Qualifed 07/01/1997			
	Place of Business -	2a. Mailing Address 26 32 10	کر خ	390		4. FEI Number - 65-0808643	No	plied For t Applicable	
Suite, Apt.	#, etc. /	Suite, Apt. #, etc.	7			5. Certifcate of Status Desired	\$8.75 A	Additional - equired	
Oity & Stat	ma Ciry, Fl.	City & State				6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> Added t		
zip 24 324	Coluntry  25 BAV	Zip 29 30	Country			<ol><li>This corporation owes the current ye Personal Property Tax.</li></ol>	☐ Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regis	tered Agent		
MOD			81	Name				i	
MCDUFFIE, KIM			82	Street A	Address	s (P.O. Box Number is Not Acceptable)			
302 E. 2ND CT.									
PANAMA CITY FL 32405			83	3					
			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 appointment of Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered egent	Do/file				hen reinstating)	27/99		
12.	OFFICERS AND	1.111	13.	<del></del>	· ^	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	
TITLE	P	DELETE	1.1 TITLE		100	es uan IC.	Change	☐ Addition	
NAME	MCDUFFIE, KEITH W	•	1.2 NAME		Kin	berly M. Missburg			
STREET ADDRESS			1.3 STREE	ADORESS	158	berly M. McDuffic 3 Cardlewick Cir.			
CITY-ST-ZIP			1.4 CITY-S		P	C P1. 32105			
TITLE	V	( )_DELETE	2.1 TITLE		V .:	ce- Pris. 211-	Change	☐ Addition	
NAME	MCDUFFIE, KIMBERLY M		2.2 NAME	1	م الا	- W MCDUTHA	- -	İ	
STREET ADDRESS	158 CANDLEWICK CIR	•	2.3 STREET	ADDRESS	130	1 1 1 m - 11		. [	
CITY-ST-ZIP	PANAMA CITY FL 32405	-e.e.	2.4 CITY-S	T-ZiP	- ' ' '	ILL W. McDuffie Same As Above"	☐ Change	☐ Addition	
TITLE !		DELETE	3.1 TITLE				∐ Glialige	C Vocation (	
NAME	NOTA THE STATE OF	~ * · · · · · · · · · · · · · · · · · ·	3.2 NAME					1	
STREET ADDRESS			3.3 STREET					ļ	
CITY-ST-ZIP		DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP		<del> </del>	☐ Change	Addition	
TITLE			4.1 IIILE 4.2 NAME		•		change		

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

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TILE

NAME

OELETE

☐ DELETE

Change

☐ Change

☐ Addition

☐ Addition