

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

**FILED**  
**Apr 23 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000070199 (9)**  
 1. Corporation Name  
**LEWIS GRAHAM LANDSCAPE, INC.**



Principal Place of Business <b>1808 PALM BEACH TRACE DR ROYAL PALM BEACH FL 33411</b>	Mailing Address <b>1808 PALM BEACH TRACE DR ROYAL PALM BEACH FL 33411</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/12/1997</b>	
21		26	<b>1128 ROYAL PALM BEACH BLVD</b>	4. FEI Number <b>65-0777607</b>	Applied For Not Applicable
22	Suite, Apt #, etc	27	<b># 322</b>	5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	City & State	28	<b>ROYAL PALM BEACH, FL</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Zip	29	<b>33411</b>	30	Country <b>USA</b>
25	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>GRAHAM, LOUIS C</b> <b>1808 PALM BEACH TRACE DR</b> <b>ROYAL PALM BEACH FL 33411</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	<b>FL</b>	85

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) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	<b>D</b> <b>GRAHAM, LOUIS C</b> <b>1808 PALM BEACH TRACE DR</b> <b>ROYAL PALM BEACH FL 33411</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D</b> <b>GRAHAM, MARA</b> <b>1808 PALM BEACH TRACE DR</b> <b>ROYAL PALM BEACH FL 33411</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<b>MARA C. FERRAC-GRAHAM</b>
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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.

**SIGNATURE:** *Marta Ferrac-Graham* **4/17/98** (561) 795-6341

CR2E034 (10/97)