SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000103654 (4)

DEAN CLARK LANDSCAPING, INC.

Principal Place of Business

Mailing Address

2048 MONTCLAIR DRIVE SARASOTA FL 34231 2048 MONTCLAIR DRIVE SARASOTA FL 34231 **FILED**

Sep 23 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

				12/08/1997
	Place of Business	2a. Mailing Address		12/08/1997 4. FEI Number Applied Fo
21		26		65-0797580 Applied Not Applied
27		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State 28				6. Election Campaign Financing \$5.00 May Be Added to Fees
Zip 24	Country 25	Ζίμ 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
Watts, dana J 1620 Main Street Suite 1 Sarasota FL 34236			81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)
			83	
			84 City	■■ 85 Zip Code
	_			FL
Office of	registered agont, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was ations of, section 607.0505, Fl	authorized by the corporal lorida Statutes.	oration submits this statement for the purpose of changing its registered dion's board of directors. I hereby accept the appointment as registered
40	Signature, typed or printed name of registered age		IOTE: Regislered Agent signature rec	
12. 101LE	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
NAME	CLARK, DEAN	[,] DELETE	1.5 TITLE	
STREET ADDRESS	l		1.2 NAME 1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34231		1.3 STREET ADDRESS	
TITLE	OTHER STEEL	DELETE	2.1 TITLE	Change Add
NAME		[] precie	2.2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP	_		2.4 CiTY-ST-ZiP	
TITLE		DELETE	3.1 TITLE	Change Ade
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Ado
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Ado
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-SY-ZIP	
TITLE		DELETE	6.1 TITLE	Change Add
NAME			6.2 NAME	
STREET ADORESS			6.3 STREET ADDRESS	
City-ST-ZiP	1		6 A CITY ST ZIG	

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 trusted 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, from an address.

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all Q15. 8004

(26/c) #SOUNT