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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000020180

Principal Place of Business

ADDISON LANDSCAPING, INC.

. N. CFL 33782	PINELLAS PARK FL 33782					
	THE DOT THE TO STORE		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		
				03/02/1998		
ace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
•	26			59-3496992	Not	Applicable
#, etc.	Suite, Apt. #, etc.			5 Contiference of Status Desired	\$8.75 A	
	27			5. Certificate of Status Desired	Fee Red	quired
9	City & State			6. Election Campaign Financing	\$5.00	May Be
	28			Trust Fund Contribution	Added to	Fees
Country	Zip	Country		8. This corporation owes the current year li	ntangible	
25	29	30		Personal Property Tax. ☐ Yes ☐ No		
9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered	d Agent	
		81	Name]
ADDISON, JON M 6351 86TH AVE. N.			82 Street Address (P.O. Box Number is Not Acceptable)			
			oliosi, radioso (r. io. por rational property)			
LLAS PARK FL 33782		83				
		_	-		os Zin C	`ndo
		84	City	F	L 85 Zip C	,oue
to the provisions of Sections 607.050	02 and 607.1508. Florida Statute	s. the abov	e-named co	rporation submits this statement for the purpose of	of changing its	registered
egistered agent, or both, in the State	of Florida, Such change was au	thorized by	the corpora	tion's board of directors. I hereby accept the app	ointment as reg	gistered
m ramiliar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Statutes	٠.	•		
Clanatura, based or printed same of registered age	of and title if applicable (NOTE:	Registered Age	nt signature regui	ired when reinstating) DATE		
			N Organization to the		AND DIRECTO	RS IN 12
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change	☐ Addition
	-	1				ļ
			TADDOESS			
FINELDAS FARR TE SSIGE	∏ DELETE		1-ZIP		Change	☐ Addition
		i i				_
			ST-ZIP		C] Change	Addition
	L] SELEIE				Griange	
]			
		3.3 STREE	T ADDRESS			
		_	ST-ZIP		Change	□ Addition
	L_I DELETE		İ		☐ Change	Addition
		4, 2 NAME				
		4.3 STREE	TADDRESS			
		4.4 CITY-5	T-ZIP			
	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
		5.2 NAME				
		5.3 STREE	T ADDRESS			
		5 4 CITY-9	T-ZIP			
	☐ DELETE	6.1 TITLE			Change	☐ Addition
		6.2 NAME				
		6.3 STREE	TADDRESS			
	Country 25 9. Name and Address of Currer SON, JON M 86TH AVE. N. LLAS PARK FL 33782 to the provisions of Sections 607.056 egistered agent, or both, in the State or familiar with, and accept the obligations.	ace of Business 2a. Mailling Address 26 #, etc. Suite, Apt. #, etc. Country Zip 25 9. Name and Address of Current Registered Agent SON, JON M 86TH AVE. N. LLAS PARK FL 33782 to the provisions of Sections 607,0502 and 607,1508, Florida Statute egistered agent, or both, in the State of Florida. Such change was au m familiar with, and accept the obligations of, Section 607,0505, Flor OFFICERS AND DIRECTORS PD ADDISON, JON M 6351 86TH AVE. N. PINELLAS PARK FL 33782 DELETE DELETE	ace of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 2a. City & State 2b. Country 2cip Country 25 29 30 30 30 30 30 30 30 30 30 3	PINELLAS PARK FL 33782 ace of Business 2a. Mailing Address 2b. #, etc. Suite, Apt. #, etc. 27 29 City & State 29 9. Name and Address of Current Registered Agent SON, JON M 86TH AVE. N. LLAS PARK FL 33782 83 City Son, Jon M 86TH AVE. N. B1 Name 82 Street Address of Current Registered Agent B1 Name B2 Street Address of City B3 Street Address of City B4 City B5 Street Address of City B6 Street Address of City B7 Street Address of City B8 Street Address of City B7 Street Address of City B8 Street Address of City B7 Street	PINELIAS PARK FL 33782 DO NOT WRITE IN THI 3. Date Incorporated or Qualified 03/02/1998 ace of Business 2a. Mailing Address 2a. Suite. Apt. #, etc. 5. Certificate of Status Possing 2a. City & State 6. Election Campaign Financing 7 trust Fund Contribution 8	Fig. 2782 PINELLAS PARK FL 33782 DO NOT WRITE IN THIS SPACE

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90143 023 ***150.00