

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 14, 2004 8:00 am**  
**Secretary of State**

06-14-2004 90001 044 \*\*\*150.00

**DOCUMENT # P98000046295**

1. Entity Name  
**LAWNSHAPERS OF CENTRAL FLORIDA, INC.**



Principal Place of Business  
**421 E. CENTER ST.  
ALTAMONTE SPRINGS, FL 32701**

Mailing Address  
**421 E. CENTER ST.  
ALTAMONTE SPRINGS, FL 32701**

**54057207**

2. Principal Place of Business  
**3320 N. Westmoreland Dr.**

3. Mailing Address  
**3320 N. Westmoreland Dr.**



06082004 Chg-P CR2E034 (10/03)

City & State  
**Orlando, FL**

City & State  
**Orlando, FL**

4. FEI Number  
**59-3513360**

Applied For  
☐ Not Applicable

Zip  
**32804**

Country  
**USA**

Zip  
**32804**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**KAST, SUSAN  
421 E. CENTER ST.  
ALTAMONTE SPRINGS, FL 32701**

**7. Name and Address of New Registered Agent**

Name **William L. Dent**  
Street Address (P.O. Box Number is Not Acceptable)  
**3320 N. Westmoreland Dr.**  
City **Orlando** FL Zip Code **32804**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **William L. Dent** DATE **6/4/04**

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE **P** ☐ Delete  
NAME **DENT, WILLIAM L**  
STREET ADDRESS **421 E. CENTER ST.**  
CITY-ST-ZIP **ALTAMONTE SPRINGS, FL 32701**

TITLE **V** ☐ Delete  
NAME **KAST, SUSAN S**  
STREET ADDRESS **421 E. CENTER ST.**  
CITY-ST-ZIP **ALTAMONTE SPRINGS, FL 32701**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **P, D** ☒ Change ☐ Addition  
NAME **Dent, William L.**  
STREET ADDRESS **3320 N. Westmoreland Dr.**  
CITY-ST-ZIP **Orlando, FL 32804**

TITLE **V, D** ☒ Change ☐ Addition  
NAME **Dent, Susan S.**  
STREET ADDRESS **3320 N. Westmoreland Dr.**  
CITY-ST-ZIP **Orlando, FL 32804**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **William L. Dent, President**

**6/4/04**

**407-830-4830**

attachment

54057207

#P98000040295

LAWNSHAPERS OF CENTRAL FLORIDA, INC.

3320 N. Westmoreland Dr., Orlando, FL 32804

June 4, 2004

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

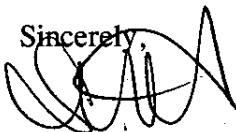
Re: 2004 ANNUAL REPORT  
LAWNSHAPERS OF CENTRAL FLORIDA, INC.

Dear Sirs or Madam:

Enclosed you will please find the 2004 Annual Report along with check no. 1845 in the amount of \$150.00. Our business moved and we had a problem with mail forwarding correctly, therefore did not receive the notice for renewal.

If you should have any questions or concerns, please contact me at 407-830-4830.

Sincerely,



Susan S. Dent  
Vice-President