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 # P98000046910

Corporation Name

TRIUMPH LAWN SERVICE, INC.				
Principal Place of Business	Mailing Address			
17941.STUDENT ACRES-ST SPRING-HILL FL 34610	17941 STUDENT ACRES ST SPRING HILL FL 34610			
2. Principal Place of Business 21 16128 FORZANDO AVE.	2a. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State			

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90151 002 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

3. Date Incorporated or Qualifed

59-3514250

5. Certifcate of Status Desired

05/26/1998 4. FEI Number

City & State	<u> </u>	City & State			6. Election Campaign Financing 55.00 May Be	.
	KSVILLE, FL	28			Trust Fund Contribution Added to Fees	1
Zip Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible	
·	509 25	29 3	0	•	Personal Property Tax. ☐ Yes No	
343	9. Name and Address of Current	<u> </u>	-		10. Name and Address of New Registered Agent	
CAN	TAMARIA, STEPHEN C			81 Name SA	NTAMARIA, STEPHEN C.	
	TAMANIA, STEPHEN C	,		82 Street	Address (P.O. Box Number is Not Acceptable)	
	NG HILL: FL-34610				128 FORZANDO AVE.	
SPRI	NG FILL FL'34610	,		83		Ì
				84 City	85 Zip Code	
				BF	ROOKSVILLE, FL 34609	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the at	bove-named by the corn	d corporation submits this statement for the purpose of changing its register poration's board of directors. I hereby accept the appointment as registered	ea
agent. I a	m familiar with, and accept the obligation	ons of Section 607.0505, Florid	a Stati	utes.	1/22	.
SIGNATURE :	-11-10 /1	1er			x 3/12/49	_
	Signature, typed or printed name of registered agent		•	Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 D/P/S/T ☑ Change ☐ Add	
TITLE	D	☐ DELETE	1.1 TII		2/1/0/1	IGAGOTI
NAME	SANTAMARIA, STEPHEN C		12 NA		SANTAMARIA, STEPHEN C.	
STREET ADDRESS	17941 STUDENT ACRES ST		1.3 ST	REET ADDRESS	, , , , , , , , , , , , , , , , , , , ,	- 1
CITY-ST-ZIP	SPRING HILL FL 34610		_	TY-ST-ZIP	BROOKSVILLE, FL 34609	ddition
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NAME			2.2 NA			
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CITY-ST-ZIP				ITY-ST-ZIP	□ Channa □ Ad	ddition
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CITY-ST-ZIP				TY-ST-ZIP		1.1742
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NAME			5.2 NA			
STREET ADDRESS				IREET ADDRESS		
CITY-ST-ZIP	<u> </u>			TY-ST-ZIP	, ,	
TITLE		☐ DELETE	6.1 TI		☐ Change ☐ Ad	ddition
NAME			6.2 N	AME		ł
STREET ADDRESS			6.3 ST	TREET ADDRESS	,	
CITY-ST-ZIP				TY-ST-ZIP		
<u> </u>	116 11 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1	this files does not qualify for t	ho ovo	metion state	ad in Section 119.07(3)(i) Florida Statutes, I further certify that the information	ion

I. 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 informatio 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.

SIGNATURE: X

READ TYPED OR INTUITED NAME OF SIGNING OFFICER OR DIRECT

STEPHEN C. SANTAMARIA 3/12/99 (352) 754-52

ZEU34 (11/98)