

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 16, 2004 8:00 am
Secretary of State

01-16-2004 90011 048 ***150.00

DOCUMENT # P99000059572

1. Entity Name
PRESTIGE LAWN CARE, INC.



Principal Place of Business
26 FERNDAL LN.
PALM COAST, FL 32137

Mailing Address
26 FERNDAL LN.
PALM COAST, FL 32137

2. Principal Place of Business

3. Mailing Address

P.O. Box 354592



01082004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
PALM COAST, FL

4. FEI Number
59-3743468

Applied For
Not Applicable

Zip Country

Zip Country
32135-4592 USA

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

6. Name and Address of Current Registered Agent

GUNTARP, PAUL M JR.
185 CYPRESS POINT PKWY, STE. 6
PALM COAST, FL 32164

7. Name and Address of New Registered Agent

Name JERRY C. KNIGHT
Street Address (P.O. Box Number is Not Acceptable)
2825 N. OCEANSHORE BLVD.
City BEVERLY BEACH FL Zip Code 32136

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 *Jerry C Knight* JERRY C. KNIGHT

01-08-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME SCHIFFMAN, STEPHEN A
STREET ADDRESS 26 FERNDAL LN.
CITY-ST-ZIP PALM COAST, FL 32137 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPST
NAME SCHIFFMAN, STEPHEN A. ☒ Change ☐ Addition
STREET ADDRESS 26 FERNDAL LANE
CITY-ST-ZIP PALM COAST, FL 32137

TITLE DVP
NAME SARA R. LANGFORD ☐ Change ☒ Addition
STREET ADDRESS 26 FERNDAL LANE
CITY-ST-ZIP PALM COAST, FL 32137

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

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

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

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

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: *Stephen A Schiffman* STEVEN A. SCHIFFMAN, President 01-08-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

386-445-6625