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Apr 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S05706

(4)

1. Corporation Name  
S & S LAWNSCAPERS, INC.



Principal Place of Business: 10021 FRUITVILLE RD. SARASOTA FL 34240  
Mailing Address: 10021 FRUITVILLE RD. SARASOTA FL 34240-9288

3. Date Incorporated or Qualified: 09/26/1990  
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business: 21  
2a. Mailing Address: 26

4. FEI Number: 65-0221306  
Applied For: Not Applicable

Suite, Apt. #, etc.: 22

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

City & State: 23

6. Election Campaign Financing Trust Fund Contribution:   
\$5.00 May Be Added to Fees

Zip: 24

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

Country: 25

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STUTZMAN, GERALD  
10021 FRUITVILLE RD.  
SARASOTA FL 34340

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 5 rows of officer information. Each row includes Title, Name, Street Address, and City-ST-ZIP. Officers listed: STUTZMAN, GERALD (PD), STUTZMAN, STACY (VD), STUTZMAN, SHIRLEY (SD), STUTZMAN, KELLY (TD). Each entry has a 'DELETE' checkbox.

Table with 4 columns for additions/changes. Each column includes Title, Name, Street Address, and City-ST-ZIP. Includes 'Change' and 'Addition' checkboxes.

14. I do 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.

SIGNATURE: Shirley Stutzman (typed) / Shirley Stutzman (handwritten) 3/27/97 941-379-1911  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Date / Daytime Phone #

CR2E034 (9/96)