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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$42406

(6)

FLORIDA	YS LAWN CARE, INC.									
Principal Place	of Business	Mailing Ac	ddress				1 100110110 111 0/210 #1881 01011 001	IN DOLL DANGE RIBER D	IDA DIDII DIBII	
	2062 SE ELMHURST RD PORT ST LUCIE FL 34952		2062 SE ELMHURST RD PORT ST LUCIE FL 34952-8852							
							3. Date incorporated or Quali 04/02/1991	I	nte of Last R 19/1996	
<u>'</u>	ace of Business	2a. Mailing	Address				4. FEI Number			oplied For
Suite, Apt. ≢	# atc	[26] Suite	Apt #, etc.				65-0256448			ot Applicable Additional
50/fe, Apr. • 2	F, CIG.	27	Mpt #; oto.				5. Certificate of Status Desire	d \square		Additional equired
City & State]	City &	State	~~~~~	••••		6. Election Campaign Financi	ng		May Be
<u> </u>		28					Trust Fund Contribution		Added	to Fees
Ζιρ 24]	Country	Zip		Count	try		8. This corporation has liabilit			. 199.032,
4	25 9. Name and Address of C	29 Current Registered A	cent	30		···· · · · · · · · · · · · · · · · · ·	Florida Statutes 10. Name and Address of Ne		_ No Agent	
FFN	TY, JEROLD B	rairoin trog.c.o.	Rour	8	31 N	ame	10: 110:110 0110 1		- Same	······
	SE ELMHURST RD				32 S	Adde	ess (P.O. Box Number is Not Acc	antabla)		
	T ST LUCIE FL 34952				2	Ifeet Aug	ess (F.O. DOX NUMBER IS NOT NOT	epianie/		
				8	33		· · · · · · · · · · · · · · · · · · ·		,	
				8	34 C	ity		P41 6	85 Zip	Code
						•		FL		
	I O tour Of	IT APAR	21.00			2.00		the europe	Changing i	ls registeren
 Pursuant t office or re 	to the provisions of Sections 60 calistered agent, or both, in the	77.0502 and 607.150€ State of Florida_Suct	 Florida Statu change was 	ites, the abo authorized I	by thi	med corp corporat	oration submits this statement for ion's board of directors. I hereby	accept the app	ointment as	registered
11. Pursuant t office or re agent. I ar	to the provisions of Sections 60 egistered agent, or both, in the militar with, and accept the	07.0502 and 607.1508 State of Florida Suctionality of Section	3, Florida Stati h change was in 607.0505, F	ites, the abo authorized I lorida Statut	by thi	med corp corporat	oration submits this statement for ion's board of directors. I hereby	accept the app	ointment as	registered
office or re agent. I an SIGNATURE	egistered agent, or both, in the m familiar with, and accept the	State of Florida Suct obligations of, Sectio	h change was on 607.0505, F	authorized I Torida Statut	by thi tes.	e corporat	ion's board of directors. I hereby	accept the app	ointment as	registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the m familiar with, and accept the Signature, typed or preter name of registr	State of Florida Suct obligations of, Sectio	h change was on 607.0505, F	authorized I Torida Statut	by thi tes.	e corporat	oration submits this statement for ion's board of directors. I hereby ed when reinstating) ADDITIONS/CHANGES TO	accept the app	ointment as	registered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the in familiar with, and accept the Signature, typed or profed rame of register OFFICE F	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut OTE: Registered A	by thi tes.	e corporat	ion's board of directors. I hereby	accept the app	ointment as	registered
office or re agent. I an SIGNATURE	egistered agent, or both, in the in familiar with, and accept the Stgrature, typed or profed name of registe OFFICE F D FENTY, JEROLD B	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut DTE Registered A	by thi tes. Agents	e corporat	ion's board of directors. I hereby	accept the app	DIRECTOR	registered
office or reagent. I an SIGNATURE.	egistered agent, or both, in the manufacture with, and accept the Stendard Notice of register Confederation of register D FENTY, JEROLD B 2062 SE ELMHURST RD	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I florida Statut DTE: Registered A 13.	by thi tes. Agent s E	e corporat	ion's board of directors. I hereby	accept the app	DIRECTOR	registered
office or reagent. Far agent. Far agent. Far SIGNATURE 12. 11ILE NAME STREET ADDRESS CHY-S1-ZIP	egistered agent, or both, in the in familiar with, and accept the Stendard hyper or protect range of register OFFICE F D FENTY, JEROLD B 2062 SE ELMHURST RD PT ST LUCIE FL	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F bie (NO	authorized I Florida Statut DTE Registered A 13. 1.1 TITLE 1.2 NAM 1.3 STRE	by thites. Agent si E E E E F F F F F F F F F	e corporat	ion's board of directors. I hereby	accept the app	DIRECTOR Change	registered RS IN 12 Addition
office or reagent. Far agent. Tar agent. Tar SIGNATURE 12. THEE NAME STREET ADDRESS GHY-ST-ZIP THEE	egistered agent, or both, in the manifer with, and accept the Stendard hyper or protect care of register OFFICE F D FENTY, JEROLD B 2062 SE ELMHURST RD PT ST LUCIE FL D	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut DTE Registered A 13. 1.1 TITLE 12 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE	by thites. Agent s E ME EET ADC (-ST-Z)	e corporat	ion's board of directors. I hereby	accept the app	DIRECTOR	registered
office or reagent. Lar agent. Lar SIGNATURE 12. THE NAME STREET ADDRESS GITY: \$1-70P THE NAME	egistered agent, or both, in the manifer with, and accept the Stendard hyper or protect care of register OFFICE F D FENTY, JEROLD B 2062 SE ELMHURST RD PT ST LUCIE FL D FENTY, ROSARY	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F bie (NO	a uthorized I Florida Statut TE Registered A 13. 1.1 TITLE 12 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI	Agent si E /E EET ADC /-ST-Z) E	e corporation and the corporation of the corporatio	ion's board of directors. I hereby	accept the app	DIRECTOR Change	registered RS IN 12 Addition
office or reagent. Lar agent. Lar SIGNATURE 112. 111.E NAME STREET ADDRESS CHY-SI-ZIP THLE NAME STREET ADDRESS	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F bie (NO	authorized I Florida Statut DTE Registered A 13. 1.1 TITLE 12 NAM 13 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE	Agent si E AE EET ADC (-ST-Z) E AE EET ADC	e corporation of corp	ion's board of directors. I hereby	accept the app	DIRECTOR Change	registered RS IN 12 Addition
Office or reagent. Lar agent. Lar SIGNATURE 112. 111.E NAME STREET ADDRESS GEY-SI-ZIP TITLE NAME STREET ADDRESS GEY-SI-ZIP	egistered agent, or both, in the manifer with, and accept the Stendard hyper or protect care of register OFFICE F D FENTY, JEROLD B 2062 SE ELMHURST RD PT ST LUCIE FL D FENTY, ROSARY	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F DELETE DELETE	authorized I Florida Statut DTE. Registered A 13. 1.1 TITLE 12 NAM 13 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY	E Agent al E AGENT ADC Y-ST-ZI E EET ADC Y-ST-Z	e corporation of corp	ion's board of directors. I hereby	accept the app	O DIRECTOR Change	registered RS IN 12 Addition Addition
Office or reagent. Lar agent. Lar SIGNATURE 112. 111LE NAME STREEL ADDRESS CITY-S1-7IP TITLE NAME STREEL ADDRESS CITY-S1-7IP TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F bie (NO	authorized I Florida Statut DTE. Registered A 13. 11 TITLE 12 NAM 13 STRE 14 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE	E AGENT SI E AGENT SI E AGENT SI E AGENT SI E AGENT ADE E AGENT AG	e corporation of corp	ion's board of directors. I hereby	accept the app	DIRECTOR Change	registered RS IN 12 Addition
Office or reagent. Lar agent. Lar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-7IP TITLE NAME STREET ADDRESS CITY-S1-7IP TITLE NAME NAME	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F DELETE DELETE	authorized I Florida Statut DTE. Registered A 13. 1.1 TITLE 12 NAM 13 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY	by this tos. E. Agent 8: E. AE EEF ADC (-ST-2) E. AE EEF ADC (-ST-2) E. AE	nature requirements RESS P RESS	ion's board of directors. I hereby	accept the app	O DIRECTOR Change	registered RS IN 12 Addition Addition
Office or reagent. Lar agent. Lar SIGNATURE 112. 111LE NAME STREEL ADDRESS CITY-S1-7IP TITLE NAME STREEL ADDRESS CITY-S1-7IP TITLE TITLE TITLE TITLE TITLE	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F DELETE DELETE	authorized I Florida Statut TE. Registered A 13. 11 TITLE 12 NAM 13 STRE 14 CITY 21 TITLE 22 NAM 23 STRE 24 CITY 31 TITLE 32 NAM	by this test. E E AGE EET ADC F F AE EET ADC E E AE EET ADC E E AE EET ADC E E AE E E AE E E AE E E AE E	ness P RESS	ion's board of directors. I hereby	accept the app	O DIRECTOR Change	registered RS IN 12 Addition Addition
Office or reagent. Lar agent. Lar SIGNATURE 12. TITLE NAME STREEL ADDRESS CHY-S1-ZIP TITLE NAME STREEL ADDRESS CHY-S1-ZIP TITLE NAME STREEL ADDRESS STREEL ADDRESS	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F DELETE DELETE	authorized I Florida Statut TE Repistered A 13. 11 TITLE 12 NAM 13 STRE 14 CITY 21 TITLE 22 NAM 23 STRE 2.4 CITY 31 TITLE 32 NAM 33 STRE	by this E E AGE EET ADC -ST-ZI E AE EEET ADC Y-ST-Z E AE EEET ADC Y-ST-Z E AC Y-ST-Z AC Y-ST-Z AC AC Y-ST-Z AC Y-ST-Z AC AC Y-ST-Z AC AC AC AC AC AC AC AC AC A	ness P RESS	ion's board of directors. I hereby	accept the app	O DIRECTOR Change	registered RS IN 12 Addition Addition
Office or reagent. Lar SIGNATURE 12. TITLE NAME STREEL ADDRESS CHY-S1-ZIP	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was n 607.0505, F	authorized I Florida Statut TE Repistered A 13. 11 TITLE 12 NAMI 13 STRE 14 CITY 21 TITLE 22 NAMI 23 STRE 2.4 CITY 31 TITLE 32 NAMI 33 STRE 34 CITY	by this by the bett added to be better added to be be better added to be better	ness P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition
Office or reagent. Far agent. Far agent. Far agent. Far alloress of the far address of th	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was n 607.0505, F	authorized I Florida Statut TE Registered A 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE	by thi Agent 4 E AE EET ADC Y-ST-Z E AE EET ADC Y-ST-Z E ME ME ME	RESS P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition
Office or reagent. Lar agent. Lar agent. Lar SIGNATURE 12. 111LE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut TE Registered A 13. 1.1 TITLE 12 NAM 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAM 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY	E E E ADC Y-ST-Z E E E E E ADC Y-ST-Z E E E E E ADC Y-ST-Z E E E E E E E E E E E E E E E E E E E	RESS P RESS P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or reagent. Lar agent. Lar agent. Lar agent. Lar SIGNATURE 12. 111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was n 607.0505, F	authorized Incided Statution of	EET ADC Y-ST-ZI EET ADC	RESS P RESS P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition
Office of reagent. Lar agent. Lar agent. Lar agent. Lar signature. 12. 111.E NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut TE Repistered A 13. 1.1 TITLE 12 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI	E E E ADC (- ST- ZI) E E E AE E E E E ADC (- ST- ZI) E E E E E E E ADC (- ST- ZI) E E E E E E E ADC (- ST- ZI) E E E E E E ADC (- ST- ZI) E E E E E ADC (- ST- ZI)	RESS P RESS P RESS P	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office or reagent. Lar agent. Lar agent. Lar agent. Lar signature. 12. 111.E NAME STREEL ADDRESS CHY-S1-ZIP TITLE NAME STREEL ADDRESS	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	authorized I Florida Statut TE Registered A 13. 1.1 TITLE 12 NAMI 13 STRE 1.4 CITY 2.1 TITLE 22 NAMI 23 STRE 2.4 CITY 3.1 TITLE 32 NAMI 3.3 STRE 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE	E E E E ADC E E E E E ADC C-ST-ZI E E E E E ADC E E E E E ADC E E E E E E ADC E E E E E E ADC E E E E E E E ADC E E E E E E E ADC E E E E E E E E ADC E E E E E E E E E E E E E E E E E E E	RESS P RESS P RESS P	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office of reagent. Far agent. Far	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	DELETE DELETE DELETE DELETE DELETE	authorized I Florida Statut TITLE 12 NAMI 13 STRE 14 CITY 24 TITLE 22 NAMI 23 STRE 24 CITY 31 TITLE 32 NAMI 33 STRE 44 CITY 4.1 TITLE 4.2 NAWI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY 5.3 STRE 5.4 CITY 5.1 STRE 5.4 CITY 5.3 STRE 5.4 CITY	E AGE EET ADC (- ST- ZI E AGE	RESS P RESS P RESS P	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change Change	Addition Addition Addition
Office or reagent. Lar agent. Lar agent. Lar agent. Lar signature. 12. 111.E NAME STREEL ADDRESS CHY-S1-ZIP TITLE THE	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	h change was on 607.0505, F	### authorized Incided Statut Total Statut	E EET ADC E EET ADC (- ST- 2) E EET ADC (- ST- 2) E EET ADC E EET ADC (- ST- 2)	RESS P RESS P RESS P	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change	RS IN 12 Addition Addition Addition
Office of reagent. Far agent. Far	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	DELETE DELETE DELETE DELETE DELETE	authorized I Florida Statut TITLE 12 NAMI 13 STRE 14 CITY 24 TITLE 22 NAMI 23 STRE 24 CITY 31 TITLE 32 NAMI 33 STRE 44 CITY 4.1 TITLE 4.2 NAWI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY 5.3 STRE 5.4 CITY 5.1 STRE 5.4 CITY 5.3 STRE 5.4 CITY	E EET ADC Y-ST-Z E AE	RESS P RESS P RESS P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change Change	Addition Addition Addition
Office of reagent. Far agent. Far	egistered agent, or both, in the maniferative, typed or protect care of register of the Control	State of Florida Such obligations of, Section ered agent and title if applicable	DELETE DELETE DELETE DELETE DELETE	### Authorized Indicated Activities and Activities	E EET ADC Y-ST-Z E EET ADC Y-ST-Z E EET ADC Y-ST-Z E EET ADC E EET ADC Y-ST-Z E EET ADC	RESS P RESS P RESS P RESS	ion's board of directors. I hereby	accept the app	DIRECTOR Change Change Change	Addition Addition Addition

JOHN THE TENENT OF BRITTS OF STORY OF S