SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 JUL 31 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S49004** **(2)**

1. Corporation Name
GALLAGHER & ROMANEK LANDSCAPING AND MAINTENANCE, INC.

Principal Place of Business	Mailing Address
5506 DEER RUN DRIVE FORT PIERCE FL 34951	5506 DEER RUN DRIVE FORT PIERCE FL 34951

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/29/1991
3a. Date of Last Report: 07/01/1994

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: 65-0265138 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GALLAGHER, FREDERICK D. JR.
5506 DEER RUN DRIVE
FORT PIERCE FL 34951

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mailing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	P S	☒ Change ☐ Addition
NAME	GALLAGHER,FREDERICK D.JR	12 NAME	Gallagher, Frederick D, Jr	
STREET ADDRESS	5506 DEER RUN DR.	13 STREET ADDRESS	5506 Deer Run Dr	
CITY-ST-ZIP	FORT PIERCE FL	14 CITY-ST-ZIP	Fort Pierce FL	
TITLE	T	21 TITLE	T V	☒ Change ☐ Addition
NAME	GALLAGHER, DONNA S.	22 NAME	Gallagher, Donna S	
STREET ADDRESS	5506 DEER RUN DR.	23 STREET ADDRESS	5506 Deer Run Dr	
CITY-ST-ZIP	FORT PIERCE FL	24 CITY-ST-ZIP	Fort Pierce FL	
TITLE	V	31 TITLE	Romanek, James D	☐ Change ☐ Addition Delete
NAME	ROMANEK, JAMES D.	32 NAME		
STREET ADDRESS	5055 9TH ST	33 STREET ADDRESS	5055 9th ST	
CITY-ST-ZIP	VERO BCH FL	34 CITY-ST-ZIP	Vero Bch FL	
TITLE	S	41 TITLE	Romanek, Diane E	☐ Change ☐ Addition Delete
NAME	ROMANEK, DIANE E.	42 NAME		
STREET ADDRESS	5055 9TH ST	43 STREET ADDRESS	5055 9th ST	
CITY-ST-ZIP	VERO BCH FL	44 CITY-ST-ZIP	Vero Bch FL	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: F D Gallagher FREDERICK GALLAGHER 7/26/95 407-468-8546
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0171512 FP