

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S56034 (9)

1. Corporation Name

GALLINA LANDSCAPING, INC.



Principal Place of Business

907 BLANDING BLVD.
P O DRAWER 202
ORANGE PARK FL 32065
US

Mailing Address

P.O. BOX 605
DRS. INLET
ORANGE PARK FL 32030
US

2. Principal Place of Business

21 907 BLANDING BLVD
Suite, Apt. #, etc.
22 PO DRAWER 202

2a. Mailing Address

26 P.O. BOX 605
Suite, Apt. #, etc.
27

City & State

23 Orange Park

Zip
24 32065

Country
25 USA

City & State

28 DRS INLET, FLA

Zip
29 32030

Country
30 USA

9. Name and Address of Current Registered Agent

RALLS, DAVID L.
225 WATER ST.
SUITE 2000
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified
05/23/1991

3a. Date of Last Report
02/28/1995

4. FEI Number
59-3074173

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

10. Name and Address of New Registered Agent

81 Name **TODD WATSON**

82 Street Address (P.O. Box Number is Not Acceptable)
SUITE 107

83 **7785 BAYMEADOWS WAY**

84 City **JACKSONVILLE**

FL 85 Zip Code
32256

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 of business 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

[Signature]

TODD WATSON, ATTORNEY AT LAW

4/29/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D GALLINA, GUY K**
STREET ADDRESS **226 KETTERING CT**
CITY-ST-ZIP **ORANGE PARK FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(k), 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:

[Signature] **GUY K. GALLINA**
President

4/29/96

9046357448

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)