

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90312 038 ***150.00

DOCUMENT # S72414

1. Entity Name

SOUTHEASTERN LANDSCAPE AND MAINTENANCE, INC.



Principal Place of Business

~~4698 133RD RD S~~
DELRAY BEACH FL 33444

Mailing Address

PO BOX 787
DELRAY BEACH FL 33444

50037013



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

4686 133RD RD S.

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 243148

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

Zip

33444

Country

USA

City & State

BOYNTON BEACH, FL

Zip

33424

Country

USA

4. FEI Number

65-0275533

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOFFE, NICOLE
1121 ASBURY WAY
BOYNTON BEACH FL 33426

7. Name and Address of New Registered Agent

Name NICOLE GEFTE
Street Address (P.O. Box Number is Not Acceptable)
1121 ASBURY WAY
City BOYNTON BEACH FL Zip Code 33426

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

Nicole Goffe

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPV ☐ Delete
NAME GEFFE, ROBERT C.
STREET ADDRESS 1508 LAKE DR.
CITY-ST-ZIP DELRAY BEACH FL

TITLE ST ☐ Delete
NAME GEFFE, ROBERT C.
STREET ADDRESS 1508 LAKE DR.
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 300 ALBRECHT LANE
CITY-ST-ZIP DURANGO, CO 81301

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 300 ALBRECHT LANE
CITY-ST-ZIP DURANGO, CO 81301

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

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

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NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/05 561-441-0140

Date

Daytime Phone #