


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

FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S88596 (9) 1. Corporation Name PRECISION LANDSCAPE MANAGEMENT, INCORPORATED			
Principal Place of Business 5427 SAGO PALM COURT 2131 WILLOW BRICK RD WINDERMERE FL 34786 US		Mailing Address 5427 SAGO PALM COURT 2131 WILLOW BRICK RD WINDERMERE FL 34786 US	
2. Principal Place of Business 21 P.O. Box 408 Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 408 Suite, Apt. #, etc.	
22 City & State 23 Windermere FL		27 City & State 28 Windermere FL	
24 Zip 34786		29 Country ORANGE	
9. Name and Address of Current Registered Agent TUCCIO, DAVID M. 2131 WILLOW BRICK RD WINDERMERE FL 34786		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: DAVID M. TUCCIO Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE: 4/14/98			
12. OFFICERS AND DIRECTORS TITLE: D NAME: TUCCIO, DAVID M. STREET ADDRESS: 5427 SAGO PALM COURT CITY-ST-ZIP: ORLANDO FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. 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 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]			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/21/1991	
4. FEI Number 59-3089782	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

CR2E034 (10/97)