

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

FILED  
Apr 22 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 # V00776

(7)

1. Corporation Name

SUNCOAST LAWN, INC.



Principal Place of Business

Mailing Address

710 RELLIMA LANE  
SARASOTA FL 34232  
US

710 RELLIMA LANE  
SARASOTA FL 34232  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1991

4. FEI Number

65-0305500

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 710 Rellim Lane

Suite, Apt. #, etc.

City & State

23 SARASOTA, FL

Zip

24 34232

Country

25 USA

2a. Mailing Address

26 710 Rellim Lane

Suite, Apt. #, etc.

City & State

28 SARASOTA, FL

Zip

29 34232

Country

30 USA

9. Name and Address of Current Registered Agent

MILLER, MARK  
750 RELLIM LANE  
SARASOTA,  
SARASOTA FL 34232

10. Name and Address of New Registered Agent

81 Name

Miller, MARK

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

710 Rellim Lane

83

84 City

SARASOTA

FL

85 Zip Code

34232

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MILLER, MARK A  
STREET ADDRESS 5085 BUNYAN WAY  
CITY-ST-ZIP SARASOTA FL

TITLE VPT ☐ DELETE

NAME MILLER, MYRA J  
STREET ADDRESS 5085 BUNYAN WAY  
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS

TITLE ☐ DELETE

NAME  
STREET ADDRESS

TITLE ☐ DELETE

NAME  
STREET ADDRESS

TITLE ☐ DELETE

NAME  
STREET ADDRESS

TITLE ☐ DELETE

NAME  
STREET ADDRESS

TITLE ☐ DELETE

NAME  
STREET ADDRESS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Street address

1.3 STREET ADDRESS 710 Rellim Lane

1.4 CITY-ST-ZIP SARASOTA, FL 34232

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Street address

2.3 STREET ADDRESS 710 Rellim Lane

2.4 CITY-ST-ZIP SARASOTA, FL 34232

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 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: (Myra J. Miller) MYRA J. Miller 4-16-98 941-371-9954

CP2E034 (10/97)