FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 JUN 20 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V04799 (5)

1. Corporation Name

D.O. LAWN SERVICES, INC.

Principal Place of Business	Mailing Address
10354 ILAH RD JACKSONVILLE FL 32257 US	~~10354 ILAH ROAD~~ ~~SUITE 429~~ ~~JACKSONVILLE FL 32257~~ US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/06/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21:
Suite, Apt. #, etc.
22:
City & State
23:
Zip 24: Country 25:

2a. Mailing Address
26: 1273 The Grove Rd
Suite, Apt. #, etc.
27:
City & State
28: Orange Park, FL
Zip 29: 32073 Country 30: US

4. FEI Number: 59-3103962 ☐ 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

~~ORTH, JEFFREY P.~~
~~10354 ILAH RD~~
~~SUITE 429~~
~~JACKSONVILLE FL 32257~~

10. Name and Address of New Registered Agent

01 Name: Sandra K. Davis
02 Street Address (P.O. Box Number is Not Acceptable): 1273 The Grove Rd
03:
04 City: Orange Park FL 05 Zip Code: 32073

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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: Sandra K. Davis — Sandra K. Davis Vice Pres — 1/18/95
(Signature of new registered agent and title, if applicable) (NOTE: Registered Agent signature required when executing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	P, T	☒ Change ☐ Addition
NAME	ORTH, JEFFREY P	12 NAME	Charles R. Davis	
STREET ADDRESS	10354 ILAH RD	13 STREET ADDRESS	1273 The Grove Rd	
CITY-ST-ZIP	JACKSONVILLE FL	14 CITY-ST-ZIP	Orange Park, FL 32073	
TITLE	VP	21 TITLE	VS	☒ Change ☐ Addition
NAME	DAVIS, CHARLES R	22 NAME	Sandra K. Davis	
STREET ADDRESS	1273 THE GROVE RD	23 STREET ADDRESS	1273 The Grove Rd	
CITY-ST-ZIP	ORANGE PARK FL	24 CITY-ST-ZIP	Orange Park FL 32073	
TITLE	ST	31 TITLE		☐ Change ☐ Addition
NAME	DAVIS, SANDRA K	32 NAME		
STREET ADDRESS	1273 THE GROVE RD	33 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
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		

14. I/We 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: Sandra K. Davis Sandra K. Davis 1/18/95 904-398-9880
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0004747 CP