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Jun 07, 1999 8:00 am
Secretary of State

06-07-1999 90006 047 ***550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V04807

1. Corporation Name
PERTICULAR LAWN, INC.

Principal Place of Business
610 SANDY HOOK RD
PALM HARBOR FL 34683
US

Mailing Address
P OBOX 365
PALM HARBOR FL 34682
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1992

4. FEI Number
59-3104037

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 208 Turner Ridge Dr.
Suite, Apt. #, etc.

22

23 Cleveland GA
City & State

24 30528 25 white
Zip Country

2a. Mailing Address

26 208 Turner Ridge Dr.
Suite, Apt. #, etc.

27

28 Cleveland GA
City & State

29 30528 30 white
Zip Country

9. Name and Address of Current Registered Agent

FOX, GREGORY A.
2380 DREW ST.
SUITE 3
CLEARWATER FL 34625

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

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 PERT, HARVEY
STREET ADDRESS 610 SANDY HOOK RD
CITY-ST-ZIP PALM HARBOR FL

TITLE VP ☐ DELETE

NAME PERT, KATHY
STREET ADDRESS 610 SANDY HOOK RD
CITY-ST-ZIP PALM HARBOR 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 208 Turner Ridge Dr.
1.4 CITY-ST-ZIP Cleveland, GA 30528

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 208 Turner Ridge Dr.
2.4 CITY-ST-ZIP Cleveland, GA 30528

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, with all other like empowered.

SIGNATURE:

Katherine M. Pert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-17-99 706-219-4323

CR2E034 (11/98)

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