PROFIT CORPORATION

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Katherine Harris

ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 DOCUMENT # **V14949** 1. Corporation Name COUNTRY MULCH, INC.

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90052 044 ***150.00



Principal Place of Business Mailing Address						T (801) Billen (1815 BIRIN 1814 BIRIN BIRI
9538 171ST STREET NORTH 9538 171ST STR JUPITER FL 33478 JUPITER FL 3347						DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed	
						02/18/1992
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21	000 Cl	26				65-0329093 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. ☐ Yes ☐ No
9. Name and Address of Current Registered Agent					_	10. Name and Address of New Registered Agent
HOWARD, ROBERT, JR.			81	Name	,	
			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
9538 171ST STREET NORTH				02 300		
JUPI	TER FL 33478			83		
				84	City	85 Zip Code
				- 1	FL	
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	Ager	nt signature require	ed when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	ST	☐ DELETE 1.1		LΕ		Change Addition
NAME	DOMINGUEZ, LEILANI W	MINGUEZ, LEILANI W 12		ME		
STREET ADDRESS	1489 SW WILDCAT RD		13 STRE		T ADDRESS	
C/TY-ST-ZIP	STUART FL 34997		1.4 CF	Y -S	T-ZIP	
TITLE			2.1 TII	LΕ		☐ Change ☐ Addition
NAME	HOWARD, HELEN 22N		2.2 NA	ME	•	
STREET ADDRESS	S 9538 171ST STREET NORTH 23		2.3 ST	REE	TADORESS	•
CITY-ST-ZIP	JUPITER FL		2.4 C	TY-S	ST-ZIP	
TITLE	☐ DELETE 3.1 T		3.1 TITLE		- Change Addition	
NAME			32 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		T ADDRESS	
CITY-ST-ZIP	51 - Zii		3.4. C	3.4. CITY-ST-ZIP		
TITLE DELETE		4.1 TI	4.1 TITLE		Change Addition	
NAME			4. 2 N	ME		
STREET ADDRESS			4.3 ST	REE	T ADDRESS	
CITY-ST-ZIP			4.4 CF		IT-ZIP	
TITLE		☐ DELETE	5.1 TF			☐ Change ☐ Addition
NAME			5.2 NA			•
STREET ADDRESS	İ		5.3 57	REE	T ADDRESS	

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.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

Marilo Ominguez SIGNATURE

Addition

☐ Change