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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V42522

(5)

MILLS GROUND MAINTENANCE, INC.

Secretary of State

**FILED** 

May 06 1997 8:00am

Principal Place of Business		Mailing Address		{	LANC ALBAN BYBYN BYBYN OLDSK BYBYN YBBY
2844 53RD STREET SARASOTA FL 34234 US		2644 53RD STREET SARASOTA FL 34234-3226 US			
				3. Date Incorporated or Qualified 06/08/1992	3a. Date of Last Report 05/01/1996
21	lace of Business	26. Mailing Address		4. FEI Number 65-0344321	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	<b>B.</b> This corporation has liability for in Florida Statutes	Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Rec	Istered Agent
	S, TERRY				
	i 53RD street Asota fl 34234		82 Street Add	dress (P.O. Box Number is Not Acceptab	e)
OMIN	Mouth IL 04204		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	Signature, typed or plinted hand of registered ag	ent and the it appropable (NOI	Registered Agent signature requ	uired when reiastetug)	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D TEODY	☐ DELFTE	3.17(1)(E		L Change L Addition
NAME	MILLS, TERRY 2644 53RD STREET		1.2 NAMI		
STREET ADDRESS	SARASOTA FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	MILLS, JENNY		2.2 NAME		El change El riosition (
STREET ADDRESS	2644 53RD STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2 4 CITY - ST - ZIP		
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3 4 CITY-ST-7IP		
TITLE		☐ DELFTE	4.1 101 E		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STRECT ADDRESS		Ì
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY-S1 - ZVP 5.1 TITLE		Change Addition
NAME :		L. Mill	5.2 NAME		El commôn El modition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4.C(1)Y+S1+Z(P		
TITLE		☐ DELFTE	6.1 Till E		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do hereby certify that the information supplied with this filling 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 is upplied annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 planged, or on an attachment with an address.					