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

**CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

(8)

SOUTH ORLANDO MOWER INC.

**FILED** Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 10011 \$11001 \$1011 \$1011 \$1000 \$1100 \$111 \$1011	.II 01011 B1011 B161	1 81911 1991
1027 W LANCASTER RD ORLANDO FL 32809 US		1027 W LANCASTER RD ORLANDO FL 32809 US				DO NOT WRITE IN THIS	SPACE	
00		•				3. Date Incorporated or Qualified		
						07/27/1992		
	lace of Business	2a. Mailing Address				4, FEI Number	<del></del>	plied For
Suite, Apt.	4 40	26 Suito Art # oto	Suite, Apt. #, etc.			59-3136956	\$8.75	ot Applicable
22		27				5. Certificate of Status Desired	Fee Re	beriupe
City & State	Ð	City & State				6. Election Campaign Financing  Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip Country				8. This corporation owes or has paid the o		
24]	25	29	30			Personal Property Tax due June 30.		] No
[27]	9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent	
SKI	NNER, PAUL A JR			81	Name			
927	PLATO AVE		82 Street Add		Street Ad	dress (P.O. Box Number is Not Acceptable)		
OR	LANDO FL 32809		}	83	•			
				84	City	F	<b>85</b> Zip (	Code
dd Darawani	to the provinces of Sections 607 050	02 and 607 1509 Florida Ctatu	too the at	20110	named co	progration submits this statement for the purpose	of changing if	ts registered
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   Ivped or profed panic of regularized access and tiple if applicable (NOTE: Registered Agent signature required when reinstating)   DATE								
				13.		ADDITIONS/CHANGES TO OFFICERS A	AD DIRECTOR	RS IN 12
12.	D OFFICERS AIN	DELETE	1.1 10	TLE		ADDITIONS/OFFIANGED TO OFFICE IO A	Change	Addition
NAME	<b>S</b> KINNER, PAUL A JR		1.2 NA				-	
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32809			1.4 CITY-ST-ZIP				
TITLE	VP	☐ DELETE	2.1 1)1				Change	Addition
NAME	SKINNER, PAUL A III		2.2 NA	ME				
STREET ADDRESS	1925 CROSSHAIR CIR		2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32837			2. 4 CITY - ST - ZIP				
TITLE	\$T	☐ DEL <b>ete</b>	DELETE 3.1 TITLE				Change	Addition
NAME	<b>SKINNER, ROSEMARY E</b>		3.2 NAME					
STREET ADDRESS	927 PLATO AVE		3.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32809		3.4. C		T-ZIP		Observe	TT 2335
TITLE		☐ DELETE	4.1 TII				Change	Addition
NAME			4. 2 NAN					
STREET ADDRESS				4.3 STREET ADDRESS 4.4 CITY-ST-ZIP				
CITY-ST-ZIP		DELETE	4.4 CI 5.1 TI		i - ZIP		Change	Addition
TITLE		FT precie					E Singingo	
NAME OTDEET ADDRESS			5.2 NAME 5.3 STREET		ADDRESS			
STREET ADDRESS				5.3 STREET ADDRESS 5.4 CITY-ST-ZIP				
CITY-ST-ZIP		DELETE			-	A 444 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Change	Addition
NAME			6.2 NAME				-	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP		- 1			
OHI-DI-DI	1/2	The state of the s	[ 4]			in Continu 110 07/2\(ii) Florida Statutes   further	portific that the	information

Indicated on this annual report or supplied with this thing does not quality 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, in on an attachment with an address.