

FILE NOW: FILING FEE AFTER MAY 1ST IS \$530.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000100000

1. Corporation Name
Florida Landscape Associates of Tampa, Inc.

Principal Place of Business
15101 Race Track Rd
Odessa, FL 33556

Mailing Address
P.O. Box 726
Safety Harbor, FL
34695-0726

Amend DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/21/97

2. Principal Place of Business
21

Suite, Apt. #, etc
22

City & State
23

Zip
24

Country
25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip
29

Country
30

4. FEI Number
65-0809305

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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B1 Name Anna Borgan
B2 Street Address (P.O. Box Number is Not Acceptable) 15101 Race Track Rd
B3
B4 City Odessa FL B5 Zip Code 33556

11. Pursuant to the provisions of Sections 607.0507 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 family with, and accept the provisions of, Section 607.0505, Florida Statutes.

SIGNATURE [Signature]

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP
President John Van Vulpes
15101 Race Track Rd
Odessa, FL 33556

11 TITLE, 12 NAME, 13 STREET ADDRESS, 14 CITY-ST-ZIP
President Anna Borgan
15101 Race Track Rd
Odessa, FL 33556

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP

21 TITLE, 22 NAME, 23 STREET ADDRESS, 24 CITY-ST-ZIP

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP

31 TITLE, 32 NAME, 33 STREET ADDRESS, 34 CITY-ST-ZIP

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP

41 TITLE, 42 NAME, 43 STREET ADDRESS, 44 CITY-ST-ZIP

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP

51 TITLE, 52 NAME, 53 STREET ADDRESS, 54 CITY-ST-ZIP

TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP

61 TITLE, 62 NAME, 63 STREET ADDRESS, 64 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 secretary 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 addition with an address.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/98 (80)20-6616

CR2E034 (10/97)