

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018429

Entity Name: F. SANTIAGO LAWN CARE, INC.

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

10731 GOODWIN STREET
BONITA SPRINGS, FL 34135

New Principal Place of Business:

18210 IRIS ROAD
FORT MYERS, FL 33967

Current Mailing Address:

P.O. BOX 1126
BONITA SPRINGS, FL 34133

New Mailing Address:

FEI Number: 01-0616107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, FRANCISCO
18210 IRIS ROAD
FORT MYERS, FL 33967 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SANTIAGO, FRANCISCO PRESIDE
Address: 10731 GOODWIN STREET
City-St-Zip: BONITA SPRINGS, FL 34135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SANTIAGO, FRANCISCO PRESIDE
Address: 18210 IRIS ROAD
City-St-Zip: FORT MYERS, FL 33967 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCISCO SANTIAGO

PRES

05/05/2008

Electronic Signature of Signing Officer or Director

_____ Date