2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005
Secretary of State

DOCUMENT# P02000127983

Entity Name: MON REVE LAWN CARE, INC.

Current Principal Place of Business:

5456 PIEDMONT
SANIBEL, FL 33957

New Principal Place of Business:

545 PIEDMONT
SANIBEL, FL 33957

Current Mailing Address:

PO BOX 07213
FT MYERS, FL 339197213

New Mailing Address:

FEI Number: 33-1040967 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHOENIX, CHARLES PT ESQUIRE
1833 HENDRY ST
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

PHOENIX, CHARLES PT ESQUIRE
12800 UNIVERSITY DRIVE
SUITE #260
FT MYERS, FL 33907 US

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: 01/28/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: STEVENS, JAMES L
Address: 545 PIEDMONT
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES L STEVENS P 01/28/2005
Electronic Signature of Signing Officer or Director — Date