

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150509

**FILED**  
**Feb 08, 2010**  
**Secretary of State**

**Entity Name:** DANIEL ZOECKLER LAWN CARE INC

**Current Principal Place of Business:**

892 VILLAGE DR.  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

892 VILLAGE DR.  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 20-0433445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIRECT BUSINESS CONSULTING,INC.  
1515 A RIDGEWOOD AVE  
HOLLY HILL, FL 32117 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ZOECKLER, DANIEL Y  
Address: 892 VILLAGE DR.  
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby 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 all other like empowered.

SIGNATURE: DANIEL ZOECKLER

PRES

02/08/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date