

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000134699

Entity Name: BC LAWNS, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

125 E. CHAPMAN RD.
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

125 E. CHAPMAN RD.
LUTZ, FL 33549

New Mailing Address:

FEI Number: 30-0336498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, CHARLES
125 E. CHAPMAN RD.
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

GRIFFIN, CHARLES L PRES
125 E. CHAPMAN RD.
LUTZ, FL 33549 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: CHARLES L GRIFFIN

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIFFIN, CHARLES
Address: 125 E. CHAPMAN RD.
City-St-Zip: LUTZ, FL 33549

Title: V () Delete
Name: GRIFFIN, ELIZABETH
Address: 125 E. CHAPMAN RD.
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: GRIFFIN, ELIZABETH J
Address: 125 E. CHAPMAN RD.
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES L GRIFFIN

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date