

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088801

FILED
Jul 05, 2008
Secretary of State

Entity Name: LEAFY LANDSCAPES & LAWN CARE, INC.

Current Principal Place of Business:

1200 FLORAL SPRINGS BLVD.
2101
PORT ORANGE, FL 32129 US

New Principal Place of Business:

Current Mailing Address:

1200 FLORAL SPRINGS BLVD.
2101
PORT ORANGE, FL 32129 US

New Mailing Address:

PO BOX 291541
PORT ORANGE, FL 32129 US

FEI Number: 26-0671221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIST, ROBERT T
1200 FLORAL SPRINGS BLVD
2101
PORT ORANGE, FL 32129 US

Name and Address of New Registered Agent:

HENDERSON, ANDREW W
1200 FLORAL SPRINGS BLVD
2101
PORT ORANGE, FL 32129 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: ANDREW W HENDERSON

07/05/2008

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: P () Delete
Name: RIST, ROBERT T
Address: 1200 FLORAL SPRINGS BLVD. #2102
City-St-Zip: PORT ORANGE, FL 32129 US

Title: VP () Delete
Name: HENDERSON, ANDREW W
Address: 1200 FLORAL SPRINGS BLVD. #2102
City-St-Zip: PORT ORANGE, FL 32129 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANDREW W HENDERSON

VP

07/05/2008

Electronic Signature of Signing Officer or Director

Date