

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000027297

FILED  
May 23, 2009  
Secretary of State

Entity Name: GALVAN BROTHERS LAWN & LANDSCAPING, INC

**Current Principal Place of Business:**

12130 GULFSTREAM BLVD  
PORT CHARLOTTE, FL 33981 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 564  
PLACIDA, FL 33946 US

**New Mailing Address:**

FEI Number: 20-8547143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KEUKER TAX SERVICE INC  
1931 TAMIAMI TRAIL  
12  
PORT CHARLOTTE, FL 33948 US

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

APT INCOME TAX & ACCOUNTING SERVICES, INC  
21045 PEACHLAND BLVD  
PORT CHARLOTTE, FL 33954 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: AMBER I. TOTH

05/23/2009

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: JESUS, GALVAN  
Address: 12130 GULFSTREAM BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VP ( ) Delete  
Name: GALVAN, VICTOR  
Address: 324 GREEN ST.  
City-St-Zip: ENGLEWOOD, FL 34223

Title: ST ( ) Delete  
Name: GALVAN, JOSE  
Address: 9384 WILLMINGTON BLVD  
City-St-Zip: ENGLEWOOD, FL 34224

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: JESUS GALVAN

P

05/23/2009

Electronic Signature of Signing Officer or Director

Date