

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K78366

**Entity Name:** HAPPY LAWN CARE, INC.

**Current Principal Place of Business:**

835 CHRISTINA CR  
OLDSMAR, FL 34677

**Current Mailing Address:**

835 CHRISTINA CR  
OLDSMAR, FL 34677 US

**FEI Number:** 59-2944855

**Certificate of Status Desired:** No

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

BASKIN, H. H., JR.  
703 COURT STREET  
CLEARWATER, FL 34616 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                  |                 |                   |
|-----------------|------------------|-----------------|-------------------|
| Title           | P                | Title           | ST                |
| Name            | SIMON, GERNOT H. | Name            | SIMON, COLLEEN M. |
| Address         | 835 CHRISTINA CR | Address         | 835 CHRISTINA CR  |
| City-State-Zip: | OLDSMAR FL 34677 | City-State-Zip: | OLDSMAR FL 34677  |

*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:** GERNOT SIMON

**PRESIDENT**

**04/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date