## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 386700** 

FILED Mar 25, 2005 Secretary of State

Entity Name: SUNCOAST LAWN SERVICE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
1 HUNTE BHR	ER RD			
	DBEE, FL 3497	74 US		
urrent M	lailing Addres	ss:	New Mailing Addres	ss:
1 HUNTE	ER RD			
SHR OKEECHO	DBEE, FL 3497	74 US		
El Number	: 59-1356845	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	LOUIS 5TH PLACE ERDALE, FL 3:	3315 US		
I.LAUDE		33.3		
he above	·		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	e named entity s e of Florida		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	e named entity s e of Florida RE:			ed office or registered agent, or both,  Date
he above the State	e named entity se of Florida. RE: Electror	submits this statement for the բ		
he above the State GNATUI	e named entity se of Florida. RE: Electror	submits this statement for the particles of Registered Agric Trust Fund Contribution ( ).	ent	
he above the State GNATUI	e named entity se of Florida.  RE: Electror  mpaign Financing  S AND DIREC	submits this statement for the particle Signature of Registered Agray Trust Fund Contribution ( ).  TORS: Delete S, CE	ent	Date
he above the State IGNATUI Iection Car OFFICER: tte: ame: ddress:	e named entity se of Florida.  RE:  Electron  mpaign Financing  S AND DIREC  PD ()  BRIN,ED LOUIS 609 SW 5 PLAG  FT.LAUDERDA	submits this statement for the partic Signature of Registered Agray Trust Fund Contribution ( ).  TORS:  Delete S, CE LE, FL Delete RET M LACE	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date BES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARET M. BRIN ST 03/25/2005