

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 529776

FILED  
Jan 27, 2009  
Secretary of State

Entity Name: CAPITAL CITY LAWN CARE & LANDSCAPING, INC.

## Current Principal Place of Business:

4881 WOODLANE CIRCLE  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

## Current Mailing Address:

4881 WOODLANE CIRCLE  
TALLAHASSEE, FL 32303

## New Mailing Address:

FEI Number: 59-1742175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUNTER, BENJAMIN H  
6997 OXTRAIL RD.  
TALLAHASSEE, FL 32312 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GUNTER, BENJAMIN H.,  
Address: 6997 OXTRAIL RD.  
City-St-Zip: TALLAHASSEE, FL 00000,

Title: DV ( ) Delete  
Name: GUNTER, JANET B  
Address: 6997 OXTRAIL RD.  
City-St-Zip: TALLAHASSEE, FL 00000,

Title: DT ( ) Delete  
Name: BRIGANCE, ROCHELLE M  
Address: 414 LOCKSLEY LANE  
City-St-Zip: TALLAHASSEE, FL

Title: V ( ) Delete  
Name: GUNTER, ADAM B  
Address: 2022 E. FOREST DR  
City-St-Zip: TALLAHASSEE, FL 32303

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition  
Name: PANIUCKI, JULIE M  
Address: 3714 SWALLOWTAIL TRACE  
City-St-Zip: TALLAHASSEE, FL 32309

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: BENJAMIN H. GUNTER

DP

01/27/2009

Electronic Signature of Signing Officer or Director

Date