

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G00976

FILED
Apr 13, 2009
Secretary of State

Entity Name: S & D LAWN MAINTENANCE CORPORATION

Current Principal Place of Business:

891 DUNBAR AVE.
OLDSMAR, FL 34677 US

New Principal Place of Business:

12538 BRONCO DR
TAMPA, FL 33626 US

Current Mailing Address:

12538 BRONCO DR.
TAMPA, FL 336263702 US

New Mailing Address:

PO BOX 1734
OLDSMAR, FL 33626 US

FEI Number: 59-2420204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLE, LINDA M
12538 BRONCO DRIVE
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

COLE, LINDA M
12538 BRONCO DR
TAMPA, FL 33626 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: LINDA M COLE

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: COLE, LINDA M
Address: 12538 BRONCO DR.
City-St-Zip: TAMPA, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change () Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

Title: MRS () Change (X) Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

Title: MRS () Change (X) Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

Title: MRS () Change (X) Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

Title: MRS () Change (X) Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

Title: MRS () Change (X) Addition
Name: COLE, LINDA M
Address: 12538 BRONCO DR
City-St-Zip: TAMPA, FL 33626 US

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: LINDA M COLE

MRS

04/13/2009

Electronic Signature of Signing Officer or Director

Date