

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J25504

FILED
Jan 07, 2009
Secretary of State

Entity Name: SUPERIOR MULCH INC.

Current Principal Place of Business:

% JAMES LULFS
7457 PARK LN RD
LAKE WORTH, FL 33467

New Principal Place of Business:

7457 PARK LANE
LAKE WORTH, FL 33449

Current Mailing Address:

% JAMES LULFS
7457 PARK LN RD
LAKE WORTH, FL 33467

New Mailing Address:

7457 PARK LANE RD
LAKE WORTH, FL 33449

FEI Number: 59-2712633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANCIANESE, MICHELLE
7457 PARK LN RD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

LANCIANESE, MICHELLE
7457 PARK LN RD
LAKE WORTH, FL 33449 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:

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LULFS, BRAIN
Address: 7457 PARK LN RD
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: LANCIANESE, MICHELLE
Address: 8640 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: V () Delete
Name: VANREETH, KATHRYN
Address: 8640 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: EPLING, ANN
Address: 8640 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: V () Delete
Name: CROTEAU, JULIE
Address: 8640 LANTANA ROAD
City-St-Zip: LAKE WORTH, FL 33467

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:

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: ML

S

01/07/2009

Electronic Signature of Signing Officer or Director

Date