2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2012
Secretary of State

DOCUMENT# J47927

Entity Name: WILSON LAWN CARE, INC.

Current Principal Place of Business:

14970 NORMANDY BLVD.
APT.#1
JACKSONVILLE, FL 322349402

New Principal Place of Business:

Current Mailing Address:

14970 NORMANDY BLVD.
APT.#1
JACKSONVILLE, FL 322349402

New Mailing Address:

FEI Number: 59-2755029 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, MELONEY J MS.
14970 NORMANDY BLVD.
APT#1
JACKSONVILLE, FL 32234 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

OFFICERS AND DIRECTORS:

Title: PTD
Name: WILSON, DOUGLAS B
Address: 14970 NORMANDY BLVD. APT #1
City-St-Zip: JACKSONVILLE, FL 32234

Title: VPS
Name: WILSON, MELONEY J
Address: 14970 NORMANDY BLVD. APT #1
City-St-Zip: JACKSONVILLE, FL 32234

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: MELONEY J WILSON VPS 01/18/2012

Electronic Signature of Signing Officer or Director — Date