

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M40855

FILED
Jan 26, 2009
Secretary of State

Entity Name: NATURAL RESOURCES PEST CONTROL TURF & LANDSCAPING SERVICES, INC.

Current Principal Place of Business:

10756 N.E. 4 AVENUE
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

10756 N.E. 4 AVENUE
MIAMI, FL 33161

New Mailing Address:

10756 N.E. 4TH AVE
MIAMI, FL 33161

FEI Number: 59-2740073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHON, TIMOTHY K.
1110 BRICKELL AVE.
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MORESCHI, CRAIG J
10756 N.E. 4TH AVE
MIAMI, FL 33161 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: CRAIG J. W. MORESCHI

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MORESCHI, CRAIG J.W.,
Address: 10756 N.E. 4 AVE.
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: MORESCHI, CHRISTINE, M.
Address: 10756 N.E. 4 AVE.
City-St-Zip: MIAMI, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V () Change (X) Addition
Name: CHRISTOPHER J.W. MOR, ESCHI
Address: 10756 N.E. 4TH AVE
City-St-Zip: MIAMI, FL

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: CRAIG J.W. MORESCHI

DP

01/26/2009

Electronic Signature of Signing Officer or Director

Date