

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 08:00 AM
Secretary of State

DOCUMENT # M73831

1. Entity Name
FATHER & SON LAWN SERVICE, INC.



Principal Place of Business % RICHARD L. BRIGGS 4644 9TH ST. ZEPHYRHILLS, FL 33542	Mailing Address % RICHARD L. BRIGGS 4644 9TH ST. ZEPHYRHILLS, FL 33542
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2951173	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRIGGS, RICHARD L.
4644 9TH ST.
ZEPHYRHILLS, FL 33540

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BRIGGS, RICHARD L. 4644 9TH ST. ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGGS, RICHARD L. 4644 9TH ST. ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000577201
 01/08/07-80007-003 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L. Briggs Date: _____ Daytime Phone #: _____