

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M74243

Entity Name: GOODWIN LAWN CARE, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

% BRUCE GOODWIN
6560 SANDLEWOOD LN
NAPLES, FL 34109

New Principal Place of Business:

% BRUCE GOODWIN
1412 FOREST LAKES BLVD.
NAPLES, FL 34105

Current Mailing Address:

% BRUCE GOODWIN
1865 FLORIDA CLUB DR. #6102
NAPLES, FL 34112 US

New Mailing Address:

% BRUCE GOODWIN
1412 FOREST LAKES BLVD.
NAPLES, FL 34105 US

FEI Number: 65-0049897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWIN, BRUCE
6560 SANDLEWOOD LN
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

GOODWIN, BRUCE
1412 FOREST LAKES BLVD.
NAPLES, FL 34105 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: BRUCE GOODWIN

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: GOODWIN, TYLER
Address: 6560 SANDLEWOOD LN
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: GOODWIN, BRUCE
Address: 6560 SANDLEWOOD LN
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GOODWIN, BRUCE
Address: 1412 FOREST LAKES BLVD.
City-St-Zip: NAPLES, FL 34105

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: BRUCE GOODWIN

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date