

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000041889

FILED
Mar 14, 2008
Secretary of State

Entity Name: MICHAEL WRIGHT LAWN SERVICE, INC.

Current Principal Place of Business:

3244 MAPLEWOOD DR.,
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

PO BOX 1046
GULF BREEZE, FL 32562

New Mailing Address:

FEI Number: 59-3648147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, MICHAEL
3244 MAPLEWOOD DR.,
GULF BREEZE, FL 32563 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: MICHAEL WRIGHT

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: WRIGHT, MICHAEL
Address: 3244 MAPLEWOOD DR.,
City-St-Zip: GULF BREEZE, FL 32563

Title: VP (X) Delete
Name: CARTER, DEAN
Address: 119 E. SUNSET AVE.
City-St-Zip: PENSACOLA, FL 32507 ES

Title: VP () Delete
Name: PINNEY, GUY M
Address: 2653 VENETIAN WAY
City-St-Zip: GULF BREEZE, FL 32563

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:

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: MICHAEL WRIGHT

Electronic Signature of Signing Officer or Director

PRES

03/14/2008

Date