

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000084849

Entity Name: U.S.A. LAWNS INC

FILED  
Apr 28, 2011  
Secretary of State

**Current Principal Place of Business:**

3223 COUNTY LINE ROAD EAST  
LUTZ, FL 33559

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4688  
CLEARWATER, FL 33758

**New Mailing Address:**

3223 COUNTY LINE ROAD EAST  
LUTZ, FL 33559

FEI Number: 59-3667914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCIANDRA, JAMES V VP  
1680 LONG BOW LANE  
CLEARWATER, FL 33764 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: P  
Name: ROSE, REINALDO J  
Address: 9267 51 ST N  
City-St-Zip: PINELLAS PARK, FL 33782 US

Title: VP  
Name: SCIANDRA, JAMES V VP  
Address: 1680 LONG BOW LANE  
City-St-Zip: CLEARWATER, FL 33764 US

Title: S  
Name: FULLMER, JUSTIN S  
Address: 18908 QUARRY BADGER ROAD  
City-St-Zip: LAND O LAKES, FL 34638 US

Title: P  
Name: HERNAN, CHARLENE L  
Address: 1671 JEFFORDS STREET  
City-St-Zip: CLEARWATER, FL 33756

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: JAMES SCIANDRA

MGR

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date