

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097025

FILED
May 01, 2006
Secretary of State

Entity Name: LINFORD WILSON LAWN AND MAINTENANCE SERVICES, INC.

Current Principal Place of Business:

11910 NW 38TH PLACE
SUNRISE, FL 33323

New Principal Place of Business:

9590 NW 24 COURT
SUNRISE, FL 33322

Current Mailing Address:

11910 NW 38TH PLACE
SUNRISE, FL 33323

New Mailing Address:

9590 NW 24 COURT
SUNRISE, FL 33322

FEI Number: 65-1050876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, LINFORD
11910 NW 38TH PLACE
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

WILSON, LINFORD
9590 NW 24 COURT
SUNRISE, FL 33322 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: LINFORD WILSON

05/01/2006

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: P () Delete
Name: WILSON, LINFORD
Address: 11910 NW 38TH PLACE
City-St-Zip: SUNRISE, FL 33323

Title: ST () Delete
Name: ANDERSON, JANET
Address: 11910 NW 38TH PLACE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, LINFORD
Address: 9590 NW 24 COURT
City-St-Zip: SUNRISE, FL 33322

Title: ST (X) Change () Addition
Name: ANDERSON, JANET
Address: 9590 NW 24 COURT
City-St-Zip: SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the 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: LINFORD WILSON

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date