2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2006
Secretary of State

DOCUMENT# P00000109467

Entity Name: UNCLE TED'S PROFESSIONAL LAWN CARE INC.

Current Principal Place of Business:

14351 MARSH HAMMOCK DRIVE, S.
JACKSONVILLE, FL 322241869

New Principal Place of Business:

Current Mailing Address:

14351 MARSH HAMMOCK DRIVE, S.
JACKSONVILLE, FL 322241869

New Mailing Address:

FEI Number: 22-3767687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILDEROTTER, TED A
14351 MARSH HAMMOCK DRIVE, S.
JACKSONVILLE, FL 322241869 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WILDEROTTER, TED A
Address: 14351 MARSH HAMMOCK DRIVE, S.
City-St-Zip: JACKSONVILLE, FL 322241869

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WILDEROTTER, TED A
Address: 14351 MARSH HAMMOCK DRIVE, S.
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP ( ) Change (X) Addition
Name: WILDEROTTER, WILLIAM J
Address: 14351 MARSH HAMMOCK DR. S.
City-St-Zip: JACKSONVILLE, FL 32224

Title: SEC ( ) Change (X) Addition
Name: WILDEROTTER, SHARON A
Address: 14351 MARSH HAMMOCK DR. S.
City-St-Zip: JACKSONVILLE, FL 32224

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: TED WILDEROTTER D 01/05/2006
Electronic Signature of Signing Officer or Director — Date