## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P01000004428

CARMICHAEL'S LAWNS, INC.



Mailing Address

410 ARTHUR MOORE DR. GREEN COVE SPRINGS, FL 32043

Principal Place of Business

410 ARTHUR MOORE DR. GREEN COVE SPRINGS, FL 32043

**FILED** Jan 26, 2007 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 01042007 4. FEI Number 59-3691288 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARMICHAEL, KEITH 410 ARTHUR MOORE DR. GREEN COVE SPRINGS, FL 32043

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its re	egistered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title	applicable (NQTE. F	Registered Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaigr     Trust Fund Contrib		\$5.00 May Be Added to Fees	U00000605515 01/30/07-80039-006 150,00		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARMICHAEL, KEITH 410 ARTHUR MOORE DR. GREEN COVE SPRINGS, FL 32043						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
NAME STREET ADDRESS CITY-S1-ZIP							
indicated	on this report or supplemental report is true a	nd accurate and that my	sice ature shall have	e the same legal effec	<ol> <li>Florida Statutes. I further certify that the information at as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if</li> </ol>		