## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000009292

Entity Name: K & M LAWN SERVICE, INC.

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6788 MIRO CT 2099 YALTA TERR NORTH PORT, FL 34287 NORTH PORT, FL 34286

Current Mailing Address: New Mailing Address:

P.O. BOX 7227 NORTH PORT, FL 34287

FEI Number: 65-1074038 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE NORTH PORT, FL 34287 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: DODD, MICHAEL A Name: DODD, MICHAEL A

 Address:
 6788 MIRO COURT
 Address:
 2099 YALTA TERR

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:
 NORTH PORT, FL 34286

Title: VTD ( ) Delete Title: VTD (X) Change ( ) Addition Name: DODD, KAREN L DODD, KAREN L

 Name:
 DODD, KAREN L

 Address:
 6788 MIRO COURT
 Address:
 2099 YALTA TERR

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:
 NORTH PORT, FL 34286

Title: S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WRIGHT, KEITH J
 Name:

 Address:
 71 STANFORD
 Address:

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 A. DODD PD 04/22/2004