2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030107

Name:

Address:

City-St-Zip:

FILED Apr 06, 2008 Secretary of State

Entity Name: PROCARE LANDSCAPE & LAW	N SERVICES, INC.
Current Principal Place of Business:	New Principal Place of Business:
4545 SUGAR PINE DR BOCA RATON, FL 33487	
Current Mailing Address:	New Mailing Address:
4545 SUGAR PINE DR BOCA RATON, FL 33487	
FEI Number: 65-1106068 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Age	ent: Name and Address of New Registered Agent:
WHITING, LORRAINE 4545 SUGAR PINE DR BOCA RATON, FL 33487 US	
The above named entity submits this statement foin the State of Florida.	or the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Register	ed Agent Date
Election Campaign Financing Trust Fund Contribution (X).
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete Name: WHITING. RON C	Title: PRES (X) Change () Addition Name: WHITING, RON C

4545 SUGAR PINE DR 4545 SUGAR PINE DR Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487 Title: () Change () Addition

() Delete Title: WHITING, LORRAINE Name: 4545 SUGAR PINE DR Address: BOCA RATON, FL 33487 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LORRAINE WHITING VΡ 04/06/2008