2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED May 31, 2007 8:00 am Secretary of State 05-04-2007 90081 035 ***150.00

DOCUMENT # P01000076285 1. Entity Name FERRY LAWN SERVICE, INC.						05-04-20	07 90	0 81 0:	35 ***150.00	
Principal Plac 2253 SW OL PALM CITY, F	YMPIC CLUB TERRACE	Meiling Address PO BOX 977 PALM CITY, FL 34991		-						
<u> </u>										
					04172007 No Chg-P CR2E034 (11/05)					
DO NOT WRITE IN THIS SPA				4 FE	I Number 5-1133	211			Applied For Not Applicable	
	_			5. Ce	rtificate c	of Status Desired			75 Additional Required	
	6. Name and Address of Current Reg	stered Agent		-			·			
FERRY, JOSEPH J 111 2253 SW OLYMPIC CLUB TERRACE					00	NOT W	'RIT	Έ		
PALM CITY, FL 34990				IN THIS SPACE						
the obligat	named entity submits this statement for the lons of registered agent.	purpose of changing its register	ed office or re	gistered ager	nt, or both	, in the State of Fli	orida. le	m familis	r with, and accept	
SIGNATURE_ Signifians, typed or printed nerve of registered agent and tibe if applicable. (NOTE: Registered Agent signifiant					debing)		DATI			
FILE NOWIN FEE IS \$150,00 After May 1, 2007 Fee will be \$650.00 9. Election Campaign Finance Trust Fund Contribution.			ncing	\$5.00 Ma Added to Fe	y Be		-			
10.	OFFICERS AND DIR	ECTORS	1		I_		-			
TITLE MAME STREET ADDRESS CITY-ST-ZIP	0 FERRY, JOSEPH J 111 P.O. BOX 977 PALM CITY, FL 34991									
TITLE NAME STREET ADDRESS CITY-ST-ZIP										

TITLE NAME STREET ADDRESS DO NOT WRITE CITY-5T-ZIP TITLE IN THIS SPACE NUME STREET ADDRESS CITY-51-ZIP IIILE NAME STREET ADDRESS CITY-ST-70P NAME STREET ADDRESS CITY-57-20

12. Thereby cartify that the information supplied with this filting does not qualify for the exemptions contained in Chepter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cert; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all officer like empowered.

SIGNATURE: