2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107336

FILED Apr 28, 2006 Secretary of State

Entity Name: GRIMALDI'S SPRINKLER SYSTEMS AND LANDSCAPE DESIGN, INC.

Current Principal Place of Business: New Principal Place of Business:

2633 N LECANTO HIGHWAY LECANTO, FL 34461

Current Mailing Address: New Mailing Address:

2633 N LECANTO HIGHWAY LECANTO, FL 34461

FEI Number: 59-3754122 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:

JARRETT, DEBORAH L GAFFNEY, KAREN O
2633 N LECANTO HIGHWAY 221 W MAIN ST
LECANTO, FL 34461 US INVERNESS,, FL 34450 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: KAREN O. GAFFNEY PA ESQ 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition JARRETT, DEBORAH L JARRETT, DEBORAH L V.PRESI Name: Name: 2633 N LECANTO HIGHWAY 2633 N LECANTO HIGHWAY Address: Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: LECANTO, FL 34461

Title: Title: () Delete (X) Change () Addition GRIMALDI. JOSEPH R OFFICER Name: GRIMALDI, JOSEPH Name: 2633 N LECANTO HIGHWAY 2633 N LECANTO HIGHWAY Address: Address: LECANTO, FL 34461 LECANTO, FL 34461 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: JARRETT, JAMES T JARRETT, JAMES T T/PRES Name: Name: 2633 N. LECANTO HWY. 2633 N. LECANTO HWY. Address: Address: City-St-Zip: LECANTO, FL 34461 City-St-Zip: LECANTO, FL 34461

Title: OFF (X) Delete Title: () Change () Addition
Name: GRIMALDI, JOSEPH Name:

 Name:
 GRIMALDI, JOSEPH
 Name:

 Address:
 2633 N. LECANTO HWY.
 Address:

 City-St-Zip:
 LECANTO, FL 34461
 City-St-Zip:

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: DEBORAH JARRETT VP 04/28/2006