

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116861

FILED  
May 03, 2004  
Secretary of State

**Entity Name:** CLASSIC CUT LAWN & MAINTENANCE, INC.

**Current Principal Place of Business:**

16300 SE HWY 42  
WEIRSDALE, FL 32195

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 622  
WEIRSDALE, FL 32195

**New Mailing Address:**

**FEI Number:** 01-0559344

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLL, ASTRID  
11201 CALLAWAY GREENS DR.  
FT. MYERS, FL 33913 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KELLAHER, BRIAN J  
Address: 16300 SE HIGHWAY 42  
City-St-Zip: WEIRSDALE, FL 32195

Title: VSTD ( ) Delete  
Name: KELLAHER, NANCY I  
Address: 16300 SE HIGHWAY 42  
City-St-Zip: WEIRSDALE, FL 32195

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:** BRIAN J. KELLAHER

PD

05/03/2004

Electronic Signature of Signing Officer or Director

Date