

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000003143

Entity Name: L & D LAWN SERVICE, INC.

**FILED**  
**Apr 24, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1355 MYERS RD.  
BROOKSVILLE, FL 34602

**New Principal Place of Business:**

**Current Mailing Address:**

1355 MYERS RD.  
BROOKSVILLE, FL 34602

**New Mailing Address:**

FEI Number: 30-0031560

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DELOACH, MICHAEL  
1355 MYERS RD.  
BROOKSVILLE, FL 34602 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LUKE, CLARENCE  
Address: 1355 MYERS RD.  
City-St-Zip: BROOKSVILLE, FL 34602

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: LUKE, CLARENCE L JR.  
Address: 1355 MYERS RD.  
City-St-Zip: BROOKSVILLE, FL 34602

Title: VP ( ) Change (X) Addition  
Name: DELOACH, MICHAEL S  
Address: 1355 MYERS RD.  
City-St-Zip: BROOKSVILLE, FL 34602

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: CLARENCE LUKE

PRES

04/24/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date