


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 14, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000008511</b> 1. Entity Name BRIAN'S LAWN MAINTENANCE, INC.	
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Principal Place of Business 8411 SINGAPORE COURT ORLANDO, FL 32817	Mailing Address PO BOX 677654 ORLANDO, FL 32867-7654
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01292004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 80-0048430	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  VON HERBULIS, BRIAN J 8411 SINGAPORE COURT ORLANDO, FL 32817
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE <i>Jacqueline VonHerbulis</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<i>V.P. Jacqueline VonHerbulis</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>	<i>4-8-04</i> <small>DATE</small>

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	1000000112817 04/14/04-80035-025 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VON HERBULIS, BRIAN J 8411 SINGAPORE COURT ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VON HERBULIS, JACQUELINE E 8411 SINGAPORE COURT ORLANDO, FL 32817
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Jacqueline VonHerbulis</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>V.P. Jacqueline VonHerbulis</i> <small>Date</small>	<i>4-8-04</i> <small>Daytime Phone #</small>