

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028917

**FILED**  
**Feb 06, 2011**  
**Secretary of State**

**Entity Name:** DAVID LOVEJOY LAWN AND LANDSCAPE INC.

**Current Principal Place of Business:**

800 NW 125 AVE  
OCALA, FL 34482

**New Principal Place of Business:**

16850 SE 60TH ST  
MORRISTON, FL 32668

**Current Mailing Address:**

800 NW 125 AVE  
OCALA, FL 34482

**New Mailing Address:**

16850 SE 60TH ST  
MORRISTON, FL 32668

**FEI Number:** 02-0569791

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOVEJOY, DAVID  
800 NW 125 AVE  
OCALA, FL 34482 US

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

LOVEJOY, DAVID  
16850 SE 60TH ST  
MORRISTON, FL 32668 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:** DAVID S. LOVEJOY

02/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LOVEJOY, DAVID S  
**Address:** 16850 SE 60TH ST  
**City-St-Zip:** MORRISTON, FL 32668

**Title:** VP  
**Name:** LOVEJOY, SUSAN A  
**Address:** 16850 SE 60TH ST  
**City-St-Zip:** MORRISTON, FL 32668

**Title:** S  
**Name:** LOVEJOY, SUSAN A  
**Address:** 16850 SE 60TH ST  
**City-St-Zip:** MORRISTON, FL 32668

**Title:** T  
**Name:** LOVEJOY, DAVID  
**Address:** 16850 SE 60TH ST  
**City-St-Zip:** MORRISTON, FL 32668

I hereby 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 all other like empowered.

**SIGNATURE:** DAVID S. LOVEJOY

PRES

02/06/2011

Electronic Signature of Signing Officer or Director

Date