

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029796

Entity Name: AVEDON LANDSCAPE, INC.

FILED
May 06, 2009
Secretary of State

Current Principal Place of Business:

1817 NW 12TH TERR.
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

1817 NW 12TH TERR.
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3032336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, WILLIAM
14818 NW 140TH ST
ALACHUA, FL 32615 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: D () Delete
Name: MCDONALD, CHARLES
Address: 1817 NW 12TH TERR
City-St-Zip: GAINESVILLE, FL 32609

Title: P (X) Delete
Name: MCDONALD, CHARLES
Address: 1817 NW 12 TERR.
City-St-Zip: GAINESVILLE, FL 32609

Title: VP () Delete
Name: MCDONALD, VICTORIA
Address: 1817 NW 12 TERR.
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: MCDONALD, CHARLES
Address: 1817 NW 12TH TERR
City-St-Zip: GAINESVILLE, FL 32609

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 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: CHARLES MCDONALD

P

05/06/2009

Electronic Signature of Signing Officer or Director

Date