## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P02000042500**

1. Entity Name

THREE SEASONS LAWN MAINTENANCE & LANDSCAPING, INC.



FILED Jul 10, 2007 08:00 AM Secretary of State

Dayime Phone #

Principal Place of Business

3705 LENA ROAD BRADENTON, FL 34211 Mailing Address

3705 LENA ROAD BRADENTON, FL 34211



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ALEXANDER, RICHARD L JR 3705 LENA ROAD BRADENTON, FL 34211

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

	_		<u> </u>			
	named entity submits this statement for the ions of registered agent,	ourpose of changing its registe	ered office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	el applicable. (NOTE, Registe	red Agent signatur	raquired when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 9. Election Cam Due by September 14, 2007 Trust Fund Ca				\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation dld not receive the prior notice.	
18.	OFFICERS AND DIRE	CTORS	1			
TITLE NAME STREET ADDRESS CRY-ST-ZIP	D ALEXANDER, RICHARD L JR 3705 LENA ROAD BRADENTON, FL 34211					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					(100000768036 07/10/07-80029-011 150.00	
TITLE NAME STREET ADDRESS CHY-ST-ZIP				DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not quality for the exemptions confained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementar freport 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 of tristee empowered to execute his 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 smoowered.						

RINGED NAME OF SIGNING OFFICER OR DIRECTOR