2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045599

FILED
Feb 25, 2004
Secretary of State

Entity Name: WALLS LAWN CARE INC.

Current Principal Place of Business:

317 RADEBAUGH DRIVE
LONGWOOD, FL 32779

New Principal Place of Business:

1755 GULF WINDS CT
APOPKA, FL 32712

Current Mailing Address:

317 RADEBAUGH DRIVE
LONGWOOD, FL 32779

New Mailing Address:

1755 GULF WINDS CT.
APOPKA, FL 32712

FEI Number: 04-3662174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEGALZOOM NEVADA INC
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WALLS, CLARENCE A JR
Address: 317 RADEBAUGH DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: T ( ) Delete
Name: WALLS, CLARENCE A JR
Address: 317 RADEBAUGH DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: S ( ) Delete
Name: WALLS, CLARENCE A JR
Address: 317 RADEBAUGH DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WALLS, CLARENCE A JR
Address: 1755 GULF WINDS CT.
City-St-Zip: APOPKA, FL 32712

Title: T (X) Change ( ) Addition
Name: WALLS, CLARENCE A JR
Address: 1755 GULF WINDS CT.
City-St-Zip: APOPKA, FL 32712

Title: S (X) Change ( ) Addition
Name: WALLS, CLARENCE A JR
Address: 1755 GULF WINDS CT.
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the 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 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 A. WALLS JR P 02/25/2004

Electronic Signature of Signing Officer or Director Date