

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054321

FILED
Jan 25, 2007
Secretary of State

Entity Name: ACTIVE LAWN CARE AND LANDSCAPING, INC.

Current Principal Place of Business:

POST OFFICE BOX 1611
MINNEOLA, FL 34755

New Principal Place of Business:

1307 GREEN FOREST COURT
UNIT 112
WINTER GARDEN, FL 34787

Current Mailing Address:

POST OFFICE BOX 1611
MINNEOLA, FL 34755

New Mailing Address:

POST OFFICE BOX 1669
MINNEOLA, FL 34755

FEI Number: 81-0551945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, SHARI
1307 GREEN FOREST COURT
UNIT 112
WINTER GARDEN, FL 34787 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: PD () Delete
Name: BUTLER, VICTOR B
Address: POST OFFICE BOX 1611
City-St-Zip: MINNEOLA, FL 34755

Title: SD () Delete
Name: BUTLER, SHARI D
Address: POST OFFICE BOX 1611
City-St-Zip: MINNEOLA, FL 34755

Title: TD () Delete
Name: ARNEGARD, DANIEL R
Address: POST OFFICE BOX 1611
City-St-Zip: MINNEOLA, FL 34755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BUTLER, VICTOR B
Address: POST OFFICE BOX 1669
City-St-Zip: MINNEOLA, FL 34755

Title: SD (X) Change () Addition
Name: BUTLER, SHARI D
Address: POST OFFICE BOX 1669
City-St-Zip: MINNEOLA, FL 34755

Title: TD (X) Change () Addition
Name: ARNEGARD, DANIEL R
Address: POST OFFICE BOX 1669
City-St-Zip: MINNEOLA, FL 34755

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARI BUTLER

SD

01/25/2007

Electronic Signature of Signing Officer or Director

Date