

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90041 048 ***150.00

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1. Entity Name
SCOTTY KAY'S LAWN'S UNLIMITED, INC.



Principal Place of Business
**13251 71ST PLACE NORTH
ROYAL PALM BCH, FL 33412**

Mailing Address
**13251 71ST PLACE NORTH
ROYAL PALM BCH, FL 33412**

50055530



DO NOT WRITE IN THIS SPACE

06302005 No Chg-P CR2E034 (10/03)

4. FEI Number
22-3868543

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KAY, CANDIS
13251 71ST PLACE NORTH
ROYAL PALM BCH, FL 33412**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **CANDIS KAY**
Signature, typed or printed name of registered agent and title if applicable.

Charles Kay
(NOTE: Registered Agent signature requires stamp (attesting))

7-13-05
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Section Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.123(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
KAY, SCOTTY
13251 71ST PLACE NORTH
ROYAL PALM BCH, FL 33412**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VDS
KAY, CANDIS
13251 71ST PLACE NORTH
ROYAL PALM BCH, FL 33412**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 or trustee empowered to execute this report as required by Chapter 807, 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 empowered.

SIGNATURE: **Charles Kay**
Signature and typed or printed name of registered agent or director

7-13-05
Date

Daytime Phone #