


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000105323 1. Entry Name A & M LAWN AND IRRIGATION SERVICE, INC.	
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Principal Place of Business 358-BENT OAK DRIVE PORT ORANGE, FL 32127	Mailing Address 358-BENT OAK DRIVE PORT ORANGE, FL 32127
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DO NOT WRITE IN THIS SPACE



04172008 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0636972	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent THOMPSON, MERVIN R 358-BENT OAK DRIVE PORT ORANGE, FL 32127

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000919233 05/13/08-80114-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D THOMPSON, MARCUS R 358-BENT OAK DRIVE PORT ORANGE, FL 32127
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D THOMPSON, BRENDA F 358-BENT OAK DRIVE PORT ORANGE, FL 32127
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MERVIN R. THOMPSON**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **4/22/2008** Daytime Phone # **386-763-0369**