

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111760

Entity Name: K.M. LANDSCAPING, INC.

FILED
Jan 16, 2006
Secretary of State

Current Principal Place of Business:

718 WILDWOOD
WINTER SPRINGS, FL 32708

New Principal Place of Business:

1009 WINDBROOK DRIVE
DELTONA, FL 32725

Current Mailing Address:

P.O. BOX 521916
LONGWOOD, FL 32752

New Mailing Address:

P.O. BOX 521916
LONGWOOD, FL 32725

FEI Number: 57-1135113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORES, KYLIE W
718 WILDWOOD
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

MOORES, KYLIE W
1009 WINDBROOK DRIVE
DELTONA, FL 32725 US

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: KYLIE W MOORES

01/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOORES, KYLIE W
Address: 718 WILDWOOD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOORES, KYLIE W
Address: 1009 WINDBROOK DRIVE
City-St-Zip: DELTONA, FL 32725

Title: SD () Change (X) Addition
Name: MOORES, JANE L
Address: 1009 WINDBROOK DRIVE
City-St-Zip: DELTONA, FL 32725

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: KYLIE W MOORES

PD

01/16/2006

Electronic Signature of Signing Officer or Director

Date