2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000125038

FILED Jun 05, 2006 Secretary of State

Entity Name: ALL CARE LAWN SERVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 15516 CRYSTAL CREEK DR. CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** PO BOX 120294 PO BOX 120294 CLERMONT, FL 34711 CLERMONT, FL 347120294 FEI Number: 82-0577242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RYBARCZYK, DEBBIE M 15516 CRYSTAL CREEK DR. CLERMONT, FL 34711 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BRITTEN, ROBERT Name: Name:

15516 CRYSTAL CREEK CT. Address: Address:

City-St-Zip: CLERMONT, FL 34711 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: RYBARRZYK, ROBERT J Name: RYBARCZYK, ROBERT J

15516 CRYSTAL CREEK COURT Address: 15516 CRYSTAL CREEK COURT Address:

CLERMONT, FL 34711 CLERMONT, FL 34711 City-St-Zip: City-St-Zip:

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.

VΡ SIGNATURE: ROBERT J. RYBARCZYK 06/05/2006