2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR).

## Secretary of State DOCUMENT # P02000131116 03-07-2007 90019 022 \*\*\*158.75 1. Entity Namo **G&S LAWN MAINTENANCE, INC.** Principal Place of Business Mailing Address 4712 37TH ST E BRADENTON FL 34203 4712 37TH ST E **BRADENTON FL 34203** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apl. #, olc. 1st MOORE CR2E034 (10/06) 4. FEI Number City & Stato City & State Applied For 14-1860692 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWN, KATHI Street Address (P.O. Box Number is Not Acceptable) 4712 37TH ST E **BRADENTON FL 34203** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Apent signature (orbitred when reinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change UNF ☐ Delete 1(1) F ■ Addition BROWN, GENE NALE MAMI 4712 37TH ST E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST- 7P CHY-SI-ZIP uni Delete ш ☐ Change ■ Addition COLLIER, SAM NAM 4712 37TH ST E SUBSTITUTION STATES STREET ADDRESS **BRADENTON FL 34203** CITY - ST-ZIP CITY-ST-ZIP 10111 ☐ Change anc Delete Addition BROWN, KATHI NAME MALE STREET ADDRESS 4712 37TH ST E STREET ADDRESS **BRADENTON FL 34203** CITY - ST- /IP C1TY-51-71P 11111 Oelele nin ☐ Change ☐ Addition MAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY SI-ZIP ☐ Delcte Change 0000 HIII ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - SI-7IP CITY-ST-7IP mie. ☐ Change HILE ☐ Delete Addition NAME NAME SIRI ET ADDRESS SHIFFT ADDRESS CITY+SI ZIP 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 119. Florida Statutos. 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 eath; that I am an officer or director of the corporation or the receiver or trustoe empowered to execute this report as required by Chapter 507, 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.

FILED

Mar 19, 2007 8:00 am