

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020081

**FILED**  
**Feb 05, 2012**  
**Secretary of State**

**Entity Name:** BOWLING'S LAWN SERVICE, INC.

**Current Principal Place of Business:**

19 FLORAL CT.  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 808  
FLAGLER BEACH, FL 32136

**New Mailing Address:**

**FEI Number:** 20-4722880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOWLING, DERON J  
19 FLORAL CT.  
PALM COAST, FL 32137 US

**Name and Address of New Registered Agent:**

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:**

Title: PRES  
Name: BOWLING, DERON J  
Address: 19 FLORAL CT.  
City-St-Zip: PALM COAST, FL 32137

I hereby 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 all other like empowered.

SIGNATURE: DERON J. BOWLING

PRES

02/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date