2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 07, 2005 08:00 AM Secretary of State Feb 07, 2005 18:00 AM Secretar	ANNUAL REPORT (AR)							FILED				
Principal Place of Business Mailing Address 137 6 ST 137 6 S								Feb 07, 2005 08:00 AM				
197 6 FL 34113 197 7 FL 34113	BIG B'S L	LAWN MA	AINTENAN	CE, INC.					Secre	ctai y	UI St	acc
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Sulfa, Apt if, etc. Sulfa, Apt if, etc. Sulfa, Apt if, etc. Sulfa, Apt if, etc. City & State City & Country City & State Secret Address of Current Registered Agent Name FOX, BRUCE K 137 6 ST NAPLES FL 34113 City FL City F		. 34113				-		112	Bilubi ili Bulbe (ili) Bb il Bb il	ושון שוושש ווושע ו	1) Fi rm (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1)) BB BB
City & State City & State Desired \$5.75 Additional Fee Prolegical Processing Pee Regulated Agent FOX. BRUCE K 137 6 ST NAPLES FL 34113 Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or reightered agent, or both, in the State of Ficrida. I am territise with, and accept the obligations of registered agent, or both, in the State of Ficrida. I am territise with, and accept the City and the City of the C	2. Principal Place of Business 3. Mailing Address											
Section Sect	Suite, Apt. #, etc Suite, Apt. #, etc.							15	st MOORE	CR2E034	1 (10/04)	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FOX, BRUCE K 137 6 ST NAPLES FL 34113 City FL Cit	<u> </u>	te 					4. FE! Numb	56-231530	B		Not Applicable	
FOX_BRUCE K 137 6 ST NAPLES FL 34113 Street Address (P.O. Box Number is Not Acceptable)	Zip				•	itry				Fee Requ		
FOX. BRUCE K 137 6 STT NAPLES FL 34113 City FL Zio Code 8. The above named only submits this statement for the purpose of changing its registered agent, or both, in the State of Fordat. T am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE FILE NOW!! FEE IS \$130.00 After May 1, 2005 Fee Will Bo \$550,00 After May 1, 2005 Fee		6. Name	and Address	of Current Rec	istered Agent		Name	7. Name an	d Address of New F	legistered	Agent	·
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent. ### Application of the State of Rodda I am familier with, and accept the obligations or registered agent. ### Application of the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the obligations or registered agent, or both, in the State of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with, and accept the state of Rodda I am familier with an accept the state of Rodda I am familier with a accept the state of Rodda I am familier with a state of Rodda I am familier with a state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am familier with an accept the state of Rodda I am fam	137	6 ST						P.O. Box Numb	per is Not Acceptable	ə) 		
B. The above named entity submits the statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. Tam familiar with, and accept the obligations of registered agent agent. SIGNATURE: Control Contr							City			FI	Zip C	ode
SIGNATURE Street yarded present rights of separate again and the lasp-cable (NOTE Regulated Agent opinitus required when warraturing) FILE NOW!!! FEE IS \$15.0.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 INTEL DO NAME FOX, BRUCE K STREET ADDRESS CITY 51-2P NAPLES FL 34113 INTEL Delete INTEL NAME STREET ADDRESS CITY 51-2P INTEL Delete INTEL NAME STREET ADDRESS CITY 51-2P INTEL NAME STREET ADDRESS CITY 51-2P INTEL Delete INTEL NAME STREET ADDRESS CITY 51-2P INTEL Delete INTEL NAME STREET ADDRESS CITY 51-2P INTEL Delete INTEL Delete INTEL Delete INTEL NAME STREET ADDRESS CITY 51-2P INTEL Delete INTEL D	8. The above the obligat	named entit	y submits this sered agent	statement for the	e purpose of changing its	register	l_ ed office or register	red agent, or bo	oth, in the State of Flo		_	th, and accept
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SIGNATURE: 2404-4936 SIGNATURE and TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daylore Phane V							nption stated in Se ure shall have the s ed by Chapter 607	ction 119.07(3) same legal effec , Florida Statute	(I), Florida Statutes 1 of as if made under c es; and that my name	further cereath; that it appears i	tify that the am an office n Block 10	information er or director or Block 11 if
	SIGNAT	URE: _	MAMA SPINATURE AND	LLL O TYPEO OJE PRINTI	ED NAME OF SIGNING OFFICER (DR DIRECT	OR .	2	-0 4- 05	239	'~ 404 -	4936