## **2006 FOR PROFIT CORPORATION**

## **ANNUAL REPORT DOCUMENT # P03000076577** PATS LAWN SERVICE, INC.



Principal Place of Business

10916 PINTO DRIVE HUDSON, FL 34669 Mailing Address

P.O. BOX 5941 HUDSON, FL 34674

## **FILED** May 05, 2006 8:00 am Secretary of State

05-05-2006 90222 001 \*\*\*300.00

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CR2E034 (11/05)

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4. FEI Number Applied For 20-0063614 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

TOTAL BOOKKEEPING SERVICE 2155 GRAND BLVD HOLIDAY, FL 34690

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No Chg-P

05012006

	named entry submits this statement for the patient of the patient of registered agent.	urpose of changing its re	gistered affice or	registered agent, or b	oth, in the State of Florida. I am familiar with, and accep	ıt
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Re	legistered Agent signatu	re required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign     Trust Fund Contribut		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	-			_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, PATRICK P.O. BOX 5941 HUDSON, FL 34674					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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12. I hereby of indicated of the corchanged,	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or truete empoweres or on an attachment with praddress, with all	ling does not qualify for the and accurate and that my to execute this report as other like empowered.	he exemptions co signature shall ha required by Cha	ontained in Chapter 11 ave the same legal effe pter 607, Florida Statut	<ol> <li>Florida Statutes. I further certify that the information oct as if made under oath; that I am an officer or director les; and that my name appears in Block 10 or Block 11 in</li> </ol>	—i f