## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000101368

Entity Name: CHOICE LAWN CARE, INC.

**FILED** Aug 29, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

100 SE 68TH CT 19651 SE 95TH ST

OCALA, FL 34472 US OCKLAWAHA, FL 32179 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 2317

BELLEVIEW, FL 34421 US

FEI Number: 57-1186654 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:

HICKS, JACOB E 100 SE 68TH CT HICKS, JACOB E 19651 SE 95TH ST

OCALA, FL 34472 US OCKLAWAHA, FL 32179 US

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: 08/29/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change ( ) Addition

HICKS, JACOB E HICKS, JACOB E Name: Name: 100 SE 68TH CT Address: 19651 SE 95TH ST Address:

City-St-Zip: OCALA, FL 34472 US City-St-Zip: OCKLAWAHA, FL 32179 US

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: JACOB HICKS PD 08/29/2008