2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000121781

Entity Name: R & D LAWN CARE, INC.

FILED Oct 08, 2006 Secretary of State

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

236 KENTUCKY AVE 1860 SADDLE HILL ROAD SOUTH

CRYSTAL BEACH, FL 34681 DUNEDIN, FL 34698

Current Mailing Address: New Mailing Address:

PO BOX 730 1860 SADDLE HILL ROAD S. CRYSTAL BEACH, FL 34681 DUNEDIN, FL 34698

FEI Number: 80-0080258 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:

SUMMERS, WENDY SUMMERS, WENDY 1860 SADDLE HILL ROAD S. 9340 N 56 ST #220A TAMPA, FL 33617 DUNEDIN, FL 34698

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: WENDY SUMMERS 10/08/2006

> 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:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete SUMMERS, WENDY SUMMERS, WENDY Name: Name: PO BOX 730 1860 SADDLE HILL ROAD S Address: Address:

City-St-Zip: CRYSTAL BEACH, FL 34681 City-St-Zip: DUNEDIN, FL 34698

Title: **VPST** Title: **VPST** (X) Change () Addition () Delete Name: SUMMERS, RUDY Name: SUMMERS, RORY

PO BOX 730 Address: 1860 SADDLE HILL ROAD S. Address: CRYSTAL BEACH, FL 34681 DUNEDIN, FL 34698 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WENDY SUMMERS PD 10/08/2006