2008 FOR PROFIT CORPORATION

FILED Apr 21, 2008 08:00 A Secretary of State

DO CUMENT # P03000126831 - I. Folity Name LEE'S MOWING & GRADING, INC. Making Address 9407 DELFT ROAD SARASOTA, FL. 34240 DO NOT WRITE IN THIS SPACE - A Feb Number 20-0372013 - Rec Applied - Required - B. Name and Address of Current Registered Agent - B. Name and Address of Florida. I am familiar with, and active of Florida. - B. Name and Address of Current Registered Agent - B. Name and Address of Current Registered Agent - B. Name and Address of Current Registered Agent - B. Name and Address of Current Registered Agent - B. Name and Address of Current Registered Agent	ANNUAL REPURI					Secretary of S			
9407 DELFT ROAD SARASOTA, FL 34240 DO NOT WRITE IN THIS SPACE 1. FEI Number 20-0372013 Applied From Proceedings of Current Registered Agent 1. Name and Address of Current Registered Agent 1. Name and Address of Current Registered Agent SIZEMORE, MARY JANE 3901 BAHNA VISTA STREET 10T 319 SARASOTA, FL 34232 1. 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. I am familiar with, and act the obligations of registered agent. SIGNATURE PILE NOWITH FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 After May 1, 2008 Fee will be \$550.00 MILLER, LEE J MILLER, LEE J MILLER, LEE J SARASOTA, FL 34240 TITE V NAME COOK, WAYNE T. SIERT MORESS SARASOTA, FL 34235 TITE S SARASOTA, FL 34235 TITE MILLER, MARYLYN J	1. Entity Nam	ne	331						
DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0372013 Applied Filed of Slatus Desired S8.75 Additional Fee Required 5. Name and Address of Current Registered Agent SIZEMORE, MARY JANE 3901 BAHIA VISTA STREET LOT 319 SARASOTA, FL 34232 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and act the obligations of registered agent. SIGNATURE PILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS SARASOTA, FL 34240 THE V	9407 DELFT	ROAD	9407 DELFT ROAD					101 H1006 H100	
SIZEMORE, MARY JANE 3901 BAHIA VISTA STREET LOT 319 SARASOTA, FL 34232 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accide the obligations of registered agent. SIGNATURE Squature, speed or printed name of registered agent and the 4 approachs PILE NOWIII FEE 13 \$150.00 After May 1, 2008 Fee will be \$550.00 P. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE MMLER, LEE J 9407 DELFT ROAD GITY-ST-2P SARASOTA, FL 34240 TITLE V NAME COOK, WAYNE T SIRIET ADDRESS 4834 ELFRIDA AVENUE GITY-ST-2P SARASOTA, FL 34235 TITLE S NAME MILLER, MARILYN J	D	O NOT WRITE	CE	02162008 4. FEI Numb 20-037	No Chg-P er 72013	CR2E034 (11/	Applied For Not Applicable Additional		
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and the 4 approache (NOTE: Registered Agent agreture required when re-notating) PILE NOWIII FÉE 13 \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 11. P MAJE MILLER, LEE J 9407 DELFT ROAD SARASOTA, FL 34240 11. COOK, WAYNE T SIREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34235 11. S MAJE MILLER, MARÜLYN J	SIZEMORE, MARY JANE 3901 BAHIA VISTA STREET LOT 319 SARASOTA, FL 34232				IN ⁻	THIS SP	ACE	with and appear	
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TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TETLE NAME STREET ADDRESS CITY-ST-ZIP TETLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DI P MILLER, LEE J 9407 DELFT ROAD SARASOTA, FL 34240 V COOK, WAYNE T 4834 ELFRIDA AVENUE SARASOTA, FL 34235 S MILLER, MARÏLYN J 9407 DELFT RD	<u> </u>	Add	DO	NOT W	RITE	23 150,60	
NAME STREET ADDRESS	NAME								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS

SIGNATURE: SIGNATURE AND TYPESOR PRINTED MAME OF EIGHING OFFICER OR DIRECTOR

4-18-08

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