## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 12, 2007 08:00 AM DOCUMENT # P03000152909 **Secretary of State** ALBRITTON'S DOWN TO EARTH GRADING, INC. Principal Place of Business Mailing Address 13125 EAST COUNTY ROAD 561A CLERMONT FL 34711 13125 EAST COUNTY ROAD 561A CLERMONT FL 34711 3. Mailing Address 2. Principal Place of Business - No PO Box # Suite, Apt. #, etc. Suite, Apt. #, otc 1st MOORE CR2E034 (10/06) Applied For City & State City & State 4. FEI Number 20-0493385 Not Applicable Zip Country Ζıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HENDERSON, TERESA Street Address (P.O. Box Number is Not Acceptable) 13125 EAST COUNTY ROAD 561A CLERMONT FL 34711 City Zip Code 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signalure, lyped or printed name of registered agent and tine i applicable. (NOTIE: Registated Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. 11115 Addition Defete Change 11113 NAME ALBRITTON, RICHARD W U00000634178 NAMI 13125 E CR. 561-A STREET ADDRESS STREET ADDRESS 02/21/07-80095-004 150.00 CLERMONT FL 34711 CHY-SI-7P CHY-SI-ZIP HHF ☐ Defete ☐ Change Addition THUE STREET ADDRESS STREET ADDRESS CHY-ST-7/P CHY-SI-ZIP DIFLE Delete mu. Change ■ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CHY-SI-7P CHY-SI-ZIF ■ Addition ☐ Delete ☐ Change NAME STREET ADORESS STREET ADDRESS CHY-SI-ZIP CIEY+ST-7IP ☐ Delete HILE HHE ☐ Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY-St-7IP CHY-SI-7IP une ■ Addition Delete TITLE ☐ Change NAMI' NAME STREET ADDRESS STREET ADDRESS CHY-S1-7P CHY-SI-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; 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 place the 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 place the 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 a supplemental report in the empower of the corporation of the corpor

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-09-07

352-243-9452

Daytime