2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 03, 2008 08:00 AN Secretary of State DOCUMENT # P03000152909 1. Entity Name ALBRITTON'S DOWN TO EARTH GRADING, INC. Principal Place of Business Mailing Address 13125 EAST COUNTY ROAD 561A 13125 EAST COUNTY ROAD 561A CLERMONT FL 34711 CLERMONT FL 34711 2. Principal Place of Business - No P O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 20-0493385 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HENDERSON, TERESA 13125 EAST COUNTY ROAD 561A CLERMONT FL 34711 Street Address (P.O. Box Number is Not Acceptable) City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or corn, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Significate, typed or primed (sand) of registered inject and title it implicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Derete TITLE ☐ Change ☐ Addition ALBRITTON, RICHARD W NAME NAME STREET ADDRESS 13125 E CR. 561-A STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-7IP TITLE Derete TITLE ☐ Change Addition NAME NAME UG0000878812 STREET ACCRESS STREET ADDRESS 04/14/08-80069-025 150.00 CITY-ST-7IP CITY-ST-ZIP Detete Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY- \$1-719 CITY-ST-ZIP Change Addition De ete TIFLE NAME NAML STREET ADORESS STREET ADDRESS CITY-ST-ZIP CHY+ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREE! ADDRESS CITY-ST-ZIP CITY+S1-ZIP TITLE Addition De ete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ... Albritton 03/27/2008 PROM

bred.

if changed, or on an attachr

indicated on this report of supplemental report is frue and accurate and that ny 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