2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000013336

Entity Name: J & D LOT CLEAN-UP & GRADING, INC.

FILED Apr 27, 2009 Secretary of State

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

 10027 SW 64TH CT
 1436 OAK VALLEY DRIVE

 OCALA, FL 34476
 SEFFNER, FL 33584

Current Mailing Address: New Mailing Address:

 10027 SW 64TH CT
 1436 OAK VALLEY DRIVE

 OCALA, FL 34476
 SEFFNER, FL 33584

FEI Number: 20-0667378 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:

 SILVERA, GENEVIEVE
 SMITH, JIM E II

 10027 SW 64TH CT
 1436 OAK VALLEY DRIVE

 OCALA, FL 34476 US
 SEFFNER, FL 33584 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: JIM E. SMITH II 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: SILVERA, GENEVIEVE Name: SMITH, JIM E II

 Address:
 10027 SW 64TH CT
 Address:
 1436 OAK VALLEY DRIVE

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:
 SEFFNER, FL 33584

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

 Name:
 SILVERA, PAUL I
 Name:

 Address:
 10027 SW 64TH CT
 Address:

 City-St-Zip:
 OCALA, FL 34476
 City-St-Zip:

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

 Name:
 SILVERA, PAULA A
 Name:

 Address:
 204 W GRANT AVE
 Address:

 City-St-Zip:
 NEW CASTLE, DE 19720
 City-St-Zip:

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

 Name:
 SILVERA, EVAL D
 Name:

 Address:
 65 CLARENDON AVE
 Address:

 City-St-Zip:
 BROCKTON, MA 02301
 City-St-Zip:

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

 Name:
 SILVERA, LATISHA J
 Name:

 Address:
 65 CLARENDON AVE
 Address:

 City-St-Zip:
 BROCKTON, MA 02301
 City-St-Zip:

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: JIM E SMITH II PRES 04/27/2009