

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 13, 2007 08:00 AM
Secretary of State**

DOCUMENT # P04000023383

1. Entity Name
FULLY INVOLVED LAWN CARE, INC.



Principal Place of Business
**1430 ROCKINGHAM LANE
DELAND, FL 32724**

Mailing Address
**1430 ROCKINGHAM LANE
DELAND, FL 32724**



04042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2682904

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WINEGARD, GEORGE O II
1430 ROCKINGHAM LANE
DELAND, FL 32724**

**DO NOT WRITE
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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: George O Winegard II
Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/07
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINEGARD, GEORGE O II 1430 ROCKINGHAM LANE DELAND, FL 32724
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WINEGARD, KELLY M 1430 ROCKINGHAM LANE DELAND, FL 32724
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04/23/07-80033-020 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: George O Winegard II
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

4/10/07 386-7404877
Date Daytime Phone #