

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000045590

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: COURTESY LAWN CARE, INC.

## Current Principal Place of Business:

3487 MAI KAI DR  
PENSACOLA, FL 32526 US

## New Principal Place of Business:

## Current Mailing Address:

3487 MAI KAI DR  
PENSACOLA, FL 32526 US

## New Mailing Address:

FEI Number: 20-0848573      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITFIELD, DAVID H  
2725 LARKIN ST  
PENSACOLA, FL 32514 US

## Name and Address of New Registered Agent:

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: DAVID H WHITFIELD

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/ST ( ) Delete  
Name: WHITFIELD, DAVID H  
Address: 2725 LARKIN ST  
City-St-Zip: PENSACOLA, FL 32514 US

Title: DVP ( ) Delete  
Name: SASSER, SAMUEL H  
Address: 3487 MAI KAI DR  
City-St-Zip: PENSACOLA, FL 32526 US

Title: DVP ( ) Delete  
Name: SASSER, JAMES H JR  
Address: 5250 BLUE ANGEL PKWY  
City-St-Zip: PENSACOLA, FL 32526 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID H WHITFIELD

Electronic Signature of Signing Officer or Director

P/ST

03/08/2006

Date