2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
05 JUN -9 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000068898

1. Entity Name
FOREVERLAWN OF FLORIDA, INC.

Principal Place of Business
8775 N. ORLANDO AVE.
MAITLAND, FL 32751

Mailing Address
2538 LAKE DEBRA DRIVE
23-110
ORLANDO, FL 32835

05262005 Chg-P CR2E034 (10/03)

2. Principal Place of Business
Suite, Apt #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 74-3120502 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ALLEN, KAREN MARGARET
2538 LAKE DEBRA DRIVE
23-110
ORLANDO, FL 32825

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSTD	☐ Delete
NAME	ALLEN, KAREN MARGARET	
STREET ADDRESS	2538 LAKE DEBRA DRIVE	
CITY-ST-ZIP	ORLANDO, FL 32835	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Change ☐ Addition
NAME	Karen M. Allen	
STREET ADDRESS	2538 Lake Debra Dr.	
CITY-ST-ZIP	Orlando, Fl 32835	
TITLE	VP	☐ Change ☒ Addition
NAME	Ty Allen	
STREET ADDRESS	2538 Lake Debra Drive	
CITY-ST-ZIP	Orlando, Fl 32835	
TITLE	ST	☐ Change ☒ Addition
NAME	Anton Krzic	
STREET ADDRESS	2538 Lake Debra Drive	
CITY-ST-ZIP	Orlando, Fl 32835	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME	200005452345 2	
STREET ADDRESS	06/13/05--01002--006 **26.25	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME	200005452345 2	
STREET ADDRESS	05/23/05--01012--017 **35.00	
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Karen Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

T. Lewis 6/13/05