

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068898

FILED
Jan 10, 2007
Secretary of State

Entity Name: FOREVERLAWN OF FLORIDA, INC.

Current Principal Place of Business:

13021 CALABAY CT
CLERMONT, FL 34711

New Principal Place of Business:

121 DIVISION ST.
SUITE A
CLERMONT, FL 34711

Current Mailing Address:

614 E HWY 50 PMB 347
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 74-3120502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, KAREN MARGARET
2538 LAKE DEBRA DRIVE
23-110
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

ALLEN, KAREN MARGARET
13021 CALABAY CT
CLERMONT, FL 34711 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: _____

01/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, KAREN MARGARET
Address: 13021 CALABAY CT
City-St-Zip: CLERMONT, FL 34711

Title: VP () Delete
Name: ALLEN, TY
Address: 13021 CALABAY CT
City-St-Zip: CLERMONT, FL 34711

Title: ST () Delete
Name: KRZIC, ANTON
Address: 1269 TAHITI CIR
City-St-Zip: DAVENPORT, FL 33897

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: KAREN ALLEN

OWNE

01/10/2007

Electronic Signature of Signing Officer or Director

Date