## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000075816

Entity Name: RIGHTMIRE'S LANDSCAPE & LAWN CARE, INC.

**FILED** Aug 10, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1285 WELDON ST. SE 4206 HEATON TERRACE PALM BAY, FL 32909 NORTH PORT, FL 34286

**Current Mailing Address: New Mailing Address:** 

1285 WELDON ST. SE 4206 HEATON TERRACE PALM BAY, FL 32909 NORTH PORT, FL 34286

FEI Number: 54-2150748 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:

RIGHTMIRE, WILLIAM A RIGHTMIRE, WILLIAM A 1285 WELDÓN ST. SE 4206 HEATON TERRACE PALM BAY, FL 32909 NORTH PORT, FL 34286 US 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: WILLIAM A. RIGHTMIRE 08/10/2005

> 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:

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

RIGHTMIRE, WILLIAM A RIGHTMIRE, WILLIAM A Name: Name: 1285 WELDON ST. SE 4206 HEATON TERRACE Address: Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: NORTH PORT, FL 34286

( ) Delete Title: VSTD Title: (X) Change ( ) Addition Name: RIGHTMIRE, SHERRY L Name: RIGHTMIRE, SHERRY L

1285 WELDON ST. SE Address: 4206 HEATON TERRACE Address: PALM BAY, FL 32909 NORTH PORT, FL 34286 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHERRY L. RIGHTMIRE **VSTD** 08/10/2005