
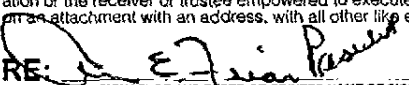


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000075999</b>		
1. Entity Name <b>CURB APPEAL LAWN SERVICES, INC.</b>		
Principal Place of Business <b>9926 BEACH BLVD SUITE 118 JACKSONVILLE, FL 32246</b>		Mailing Address <b>9926 BEACH BLVD SUITE 118 JACKSONVILLE, FL 32246</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
		 01062006 No Chg-P CR2E034 (11/05)
		4. FEI Number <b>86-1105633</b> Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Name and Address of Current Registered Agent		
<b>FRIAR, ANN E 9926 BEACH BLVD SUITE 118 JACKSONVILLE, FL 32246</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ (NOTE: Registered Agent signature required when reinstating)		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
		DATE <b>02/10/06-80011-003 150.00</b>
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P FRIAR, ANN E 7623 GALVESTON AVE JACKSONVILLE, FL 32211</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT FRIAR, JOHN H 7623 GALVESTON AVE JACKSONVILLE, FL 32211</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S HOSKINS, WILLIAM A 7623 GALVESTON AVE JACKSONVILLE, FL 32211</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 as an attachment with an address, with all other like empowered.		
SIGNATURE:  <b>ANN E. FRIAR President</b>		Date <b>1-30-06</b> (904) 703-4219