

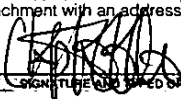


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

04-13-2005 90049 018 \*\*\*150.00

<b>DOCUMENT # P04000083594</b> 1. Entity Name <b>COMMON GROUND LAND CARE, INC.</b>					
Principal Place of Business <b>11103 LAKE KATHERINE CIRCLE CLERMONT, FL 34711</b>			Mailing Address <b>11103 LAKE KATHERINE CIRCLE CLERMONT, FL 34711</b>		
2. Principal Place of Business <b>Common Ground Land Care</b> Suite, Apt. #, etc. <b>12013 County Road 561</b> City & State <b>Clermont, FL</b> Zip <b>34711</b>		3. Mailing Address <b>Common Ground Land Care</b> Suite, Apt. #, etc. <b>12013 County Road 561</b> City & State <b>Clermont, FL</b> Zip <b>34711</b>			
4. FEI Number <b>34-1997417</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent  <b>SPIEGEL &amp; UTRERA, P.A.</b> <b>1840 SW 22ND ST.</b> <b>4TH FLOOR</b> <b>MIAMI, FL 33145</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP COLLINS, CHRISTOPHER 11103 LAKE KATHERINE CIRCLE CLERMONT, FL 34711	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO HERMANN, ERIN 11103 LAKE KATHERINE CIRCLE CLERMONT, FL 34711	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Delete			
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.					
<b>SIGNATURE:</b>  <b>Christopher Collins</b> President 4/13/05 407.694.3188					