

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Feb 06, 2008 08:00 AM  
Secretary of State**

<b>DOCUMENT # P04000083760</b> 1. Entity Name PLANTATION LAWN MAINTENANCE, INC.	
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Principal Place of Business 3705 N COURTENAY PARKWAY MERRITT ISLAND, FL 32953	Mailing Address 3705 N COURTENAY PARKWAY MERRITT ISLAND, FL 32953
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**DO NOT WRITE IN THIS SPACE**



02052008 No Chg-P -CR2E034 (11/05)

4. FEI Number 20-1142564	Applied For 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

BOUCHER, MICHAEL G  
3705 N COURTENAY PARKWAY  
MERRITT ISLAND, FL 32953

**DO NOT WRITE  
IN THIS SPACE**

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 Michael G. Boucher DATE 02/05/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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	000000819286 02/15/08-80077-016 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOUCHER, MICHAEL G 3705 N COURTENAY PARKWAY MERRITT ISLAND, FL 32953
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Michael G. Boucher DATE 02/05/08 (321) 459-2902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR