

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097397

FILED  
Aug 13, 2010  
Secretary of State

Entity Name: JACOB MILLER LAWNCARE, INC.

## Current Principal Place of Business:

30 ADAMS AVE.  
KISSIMMEE,, FL 34744 01

## New Principal Place of Business:

2835 LAKE TOHOPALIGA BLVD.  
KISSIMMEE,, FL 34744 01

## Current Mailing Address:

30 ADAMS AVENUE  
KISSIMMEE,, FL 34744

## New Mailing Address:

FEI Number: 20-1301149      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLOMBEY, MARTINE P  
30 ADAMS AVENUE  
KISSIMMEE,, FL 34744 OSC US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: MILLER, JACOB D  
Address: 2835 LAKE TOHOPALIGA BLVD.  
City-St-Zip: KISSIMMEE,, FL 34744 OS

Title: VP  
Name: MILLER, JACOB D  
Address: 2835 LAKE TOHOPEKALIGA BLVD  
City-St-Zip: KISSIMMEE,, FL 34744 OS

Title: T  
Name: MILLER, JACOB D  
Address: 2835 LAKE TOHOPEKALIGA BLVD  
City-St-Zip: KISSIMMEE,, FL 34744 OS

Title: S  
Name: MILLER, JACOB D  
Address: 2835 LAKE TOHOPEKALIGA BLVD  
City-St-Zip: KISSIMMEE,, FL 34744 OS

I hereby 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 all other like empowered.

SIGNATURE: JACOB D MILLER

P

08/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date