

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105535

FILED
May 01, 2006
Secretary of State

Entity Name: CUTTING EDGE LAWN SERVICE OF POLK COUNTY, INC.

Current Principal Place of Business:

708 S.E. 9TH
FORT MEADE, FL 33841

New Principal Place of Business:

509 SE 9TH STREET
FORT MEADE, FL 33841

Current Mailing Address:

708 S.E. 9TH STREET
FORT MEADE, FL 33841

New Mailing Address:

509 SE 9TH STREET
FORT MEADE, FL 33841

FEI Number: 20-1416751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, JR., DONALD H
245 SOUTH CENTRAL AVE
BARTOW, FL 33830 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

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: D () Delete
Name: JOHNSON, JAY DOUGLAS
Address: 708 S.E. 9TH STREET
City-St-Zip: FORT MEADE, FL 33841

Title: D () Delete
Name: JOHNSON, CANDACE D
Address: 708 S.E. 9TH ST.
City-St-Zip: FORT MEADE, FL 33841

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, JAY DOUGLAS
Address: 509 SE 9TH STREET
City-St-Zip: FORT MEADE, FL 33841

Title: D (X) Change () Addition
Name: JOHNSON, CANDACE D
Address: 509 SE 9TH STREET
City-St-Zip: FORT MEADE, FL 33841

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CANDACE D JOHNSON

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date