

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000112703

FILED
Mar 27, 2006
Secretary of State

Entity Name: ALWAYS FAIR LAWN CARE INC

Current Principal Place of Business:

980 CANALVIEW PLACE
#D8
PORT ORANGE, FL 32128

New Principal Place of Business:

903 KINGSPOINT COURT
HOLLY HILL, FL 32117 US

Current Mailing Address:

980 CANALVIEW PLACE
#D8
PORT ORANGE, FL 32128

New Mailing Address:

903 KINGSPOINT COURT
HOLLY HILL, FL 32117 US

FEI Number: 20-1458407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, JONATHAN
980 CAANLVIEW PLACE
#D8
PORT ORANGE, FL 32128 US

Name and Address of New Registered Agent:

EDWARDS, JONATHAN
903 KINGSPOINT COURT
HOLLY HILL, FL 32117 US

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: JONATHAN EDWARDS

03/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: EDWARDS, JONATHAN
Address: 980 CANALVIEW PLACE #D8
City-St-Zip: PORT ORANGE, FL 32128

Title: VP () Delete
Name: COTTON, DOUGLAS
Address: 980 CANALVIEW PLACE
City-St-Zip: PORT ORANGE, FL 32128

Title: S () Delete
Name: EDWARDS, MELANIE
Address: 980 CANALVIEW PLACE
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: EDWARDS, JONATHAN
Address: 903 KINGSPOINT COURT
City-St-Zip: HOLLY HILL, FL 32117 US

Title: VP (X) Change () Addition
Name: COTTON, DOUGLAS
Address: 903 KINGSPOINT COURT
City-St-Zip: HOLLY HILL, FL 32117 US

Title: S (X) Change () Addition
Name: EDWARDS, MELANIE
Address: 903 KINGSPOINT COURT
City-St-Zip: HOLLY HILL, FL 32117 US

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: JONATHAN EDWARDS

PT

03/27/2006

Electronic Signature of Signing Officer or Director

Date