2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2006
Secretary of State

DOCUMENT# P04000115449

Entity Name: SOUTH FLORIDA LAWNS IRRIGATION DIVISION, INC

Current Principal Place of Business:

1591 SE PORT ST LUCIE BLVD
SUITE C
PT ST LUCIE, FL 34952

New Principal Place of Business:

1591 SE PORT ST LUCIE BLVD
SUITE C
PORT ST LUCIE, FL 34952

Current Mailing Address:

1591 SE PORT ST LUCIE BLVD
SUITE C
PT ST LUCIE, FL 34952

New Mailing Address:

1591 SE PORT ST LUCIE BLVD
SUITE C
PORT ST LUCIE, FL 34952

FEI Number: 20-1462416 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MECCA, DENNIS
1591 SE PORT ST LUCIE BLVD,
SUITE C
PT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

MECCA, DENNIS
1591 SE PORT ST LUCIE BLVD,
SUITE C
PORT ST LUCIE, FL 34952 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: DENNIS MECCA 05/16/2006
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: DP ( ) Delete
Name: MECCA, DENNIS
Address: 1591 SE PORT ST LUCIE BLVD, SUITE C
City-St-Zip: PT ST LUCIE, FL 34952

Title: VPTS ( ) Delete
Name: MECCA, DENNIS
Address: 1591 SE PORT ST LUCIE BLVD, SUITE C
City-St-Zip: PT ST LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MECCA, DENNIS
Address: 1591 SE PORT ST LUCIE BLVD, SUITE C
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VPTS (X) Change ( ) Addition
Name: MECCA, DENNIS
Address: 1591 SE PORT ST LUCIE BLVD, SUITE C
City-St-Zip: PORT ST LUCIE, FL 34952

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: DENNIS MECCA DP 05/16/2006
Electronic Signature of Signing Officer or Director Date