

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123943

Entity Name: FLORIDA LANDSCAPE DOCTOR, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

96 BRIDLE DR
INTERLACHEN, FL 32148

New Principal Place of Business:

Current Mailing Address:

PO BOX 1129
PALATKA, FL 32178

New Mailing Address:

FEI Number: 20-1607054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENTINE, R. KEITH
96 BRIDLE DR
INTERLACHEN, FL 32148 US

Name and Address of New Registered Agent:

VALENTINE, R. KEITH
144 LAKE EDGE TRAIL
INTERLACHEN, FL 32148 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: R. KEITH VALENTINE

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALENTINE, R. KEITH
Address: 144 LAKE EDGE TR
City-St-Zip: INTERLACHEN, FL 32148

Title: ST () Delete
Name: VALENTINE, KEITH R
Address: 144 LAKE EDGE TR
City-St-Zip: INTERLACHEN, FL 32148

Title: V () Delete
Name: VALENTINE, JOHN T JR
Address: 2035 WILLIAMS RD
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: VALENTINE, R. KEITH
Address: 144 LAKE EDGE TR
City-St-Zip: INTERLACHEN, FL 32148

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: R. KEITH VALENTINE

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date