

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123943

FILED  
May 01, 2010  
Secretary of State

**Entity Name:** FLORIDA LANDSCAPE DOCTOR, INC.

**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  
144 LAKE EDGE TRAIL  
INTERLACHEN, FL 32148 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: P  
Name: VALENTINE, R. KEITH  
Address: 144 LAKE EDGE TR  
City-St-Zip: INTERLACHEN, FL 32148

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

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

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: RAYMON KEITH VALENTINE

PRES

05/01/2010

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

\_\_\_\_\_  
Date