2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 06, 2005 8:00 am Secretary of State

05-06-2005 90097 038 ***150 00

1. Entity Name FLORIDA LAWN MANAGEMENT SERVICES, INC.						05-06-2	005 9009	97 038 ***1	50.00
Principal Place of Business		Mailing Address			66021883				
13223 HEATHER RIDGE LOOP FORT MYERS, FL 33912		13223 HEATHER RIDGE LOOP FORT MYERS, FL 33912							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04222005	Chg-P	CR2	E034 (10/03)		
City & State		City & State		4. FEI Numbe 7706	500	48		plied For LApplicable	
Ζìρ	Country	Zip Coun		stry	5. Certificate	of Status Desire	ed 🔀	\$8.75 Add Fee Required	
Name and Address of Current Registered Agent				Name	7. Name and	Address of Ne	w Registere	rd Agent	
ALVAREZ, SERGIO									
	ATHER RIDGE LOOP ERS, FL 33912			Street Address (P.O. Box Number is Not Acceptable)					
•.				City			F	Zip Code	,
8. 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. I am familiar with, and accept									
the obligations of registered agent. SECTIO ACVAND SIGNATURE Signature, typed or private name of registered agent and sife if applicable. (NOTE, Registered Agent information required when remislating) ATE									
FILE NOW!!! FEE IS \$180.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5,00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND		11.		ADDITIONS/	CHANGES TO	OFFICERS A	ND DIRECTORS	
TITLE NAME	ALVAREZ, SERGIO	☐ Delete	TITU					Change	Addition
STREET ADDRESS CITY-ST-EP	13223 HEATHER RIDGE LOOP FORT MYERS, FL 33912			EET ADORESS '-ST-ZIP	<u></u>				
TITLE NAME	VP RODRIGUEZ-GARITA, ANDREA	☐ Deleta	TITL					Change	Addition
STREET ADDRESS CITY-ST-ZIP	13223 HEATHER RIDGE LOOP FORT MYERS, FL 33912		STRE	EET ADDRESS ST-ZIP					
IIITE		☐ Deleta	TITL	J				☐ Change	Addition
NAME STREET ADORESS			NAM STRE	IE Eet address					
CITY-ST-ZIP			+	- ST-ZIP					
TITLE NAME		Delitte -	¯ ° πτι κων	II				☐ Change	Addition
STREET ADDRESS CITY-51-ZIP				EET ADDRESS '-S1-ZIP					
TITLE		Delete	TITU NAM		· •			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			STR	EET ADDRESS '-ST-ZIP					
TIFLE NAME		☐ Delete	TITL	į.				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP				EET ADORESS '-SI-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if chapted, or on an attachment with an address, with all other like empowered.									
SIGNATURE: SFRUM APVANDO 4/08/05									
1	SIGNATURE AND TYPED OR I	MINTED HAME OF SIGNING OFFICER O	M DIREC	TOR		Tata T		Daytime Phone #	