

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146713

FILED
May 09, 2006
Secretary of State

Entity Name: JOE'S PROPERTY MAINTENANCE & LANDSCAPING, INC.

Current Principal Place of Business:

8903 WARRIOR WAY
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5894
HUDSON, FL 34674

New Mailing Address:

FEI Number: 42-1647665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAY, CEDRIC P ESQ
12312 US HWY 19 - NORTH
HUDSON, FL 34667 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: D () Delete
Name: PARKER, JOSEPH
Address: 8903 WARRIOR WAY
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: BARKER, PENNIE
Address: 8903 WARRIOR WAY
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PENNIE R. BARKER

D

05/09/2006

Electronic Signature of Signing Officer or Director

Date