

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

8/

FILED
Aug 24, 2005 8:00 am
Secretary of State

08-04-2005 90005 009 ***150.00

DOCUMENT # P04000146931 1. Entity Name GARDEN LANE OF FLORIDA LAWN & LANDSCAPE, INC.					
Principal Place of Business 12290 SE 104TH CT. BELLEVUE, FL 34420			Mailing Address 12290 SE 104TH CT. BELLEVUE, FL 34420		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-1798647	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
MARRS, JASON B 12290 SE 104TH CT. BELLEVUE, FL 34420				Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when removing)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PST		<input type="checkbox"/> Delete		
NAME	MARRS, JASON B		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	12290 SE 104TH CT.		TITLE		
CITY- ST- ZIP	BELLEVUE, FL 34420		NAME		
TITLE	<input type="checkbox"/> Delete		STREET ADDRESS		
NAME			CITY- ST- ZIP		
STREET ADDRESS			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY- ST- ZIP			TITLE		
TITLE	<input type="checkbox"/> Delete		NAME		
NAME			STREET ADDRESS		
STREET ADDRESS			CITY- ST- ZIP		
CITY- ST- ZIP			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			TITLE		
STREET ADDRESS			NAME		
CITY- ST- ZIP			STREET ADDRESS		
TITLE	<input type="checkbox"/> Delete		CITY- ST- ZIP		
NAME			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS			TITLE		
CITY- ST- ZIP			NAME		
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JASON MARRS</u> 8/1/05 3525725181 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

66026304



08012005 Chg-P CR2E034 (10/03)

4. FEI Number
20-1798647

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARRS, JASON B
12290 SE 104TH CT.
BELLEVUE, FL 34420

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> Delete
NAME	MARRS, JASON B	
STREET ADDRESS	12290 SE 104TH CT.	
CITY- ST- ZIP	BELLEVUE, FL 34420	
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY- ST- ZIP		

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SIGNATURE: JASON MARRS 8/1/05 3525725181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR