

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000172011 1. Entity Name ALL FOR YOU LANDSCAPE AND MAINTENANCE INC.	
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Principal Place of Business 3475 OLD EDWARDS ROAD FORT PIERCE, FL 34981	Mailing Address 3475 OLD EDWARDS ROAD FORT PIERCE, FL 34981
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2088311	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**WILLIS, KIMBERLY
3475 OLD EDWARDS ROAD
FORT PIERCE, FL 34981**

**DO NOT WRITE
IN THIS SPACE**

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 *Kimberly Willis* DATE 3-2-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	11000000443973 03/06/06-80031-025 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO WILLIS, KIMBERLY 3475 OLD EDWARDS ROAD FORT PIERCE, FL 34981
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLIS, JUSTIN 3475 OLD EDWARDS ROAD FORT PIERCE, FL 34981
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Kimberly Willis* 3-2-06 (772) 489-4777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #