

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172011

FILED
Apr 30, 2009
Secretary of State

Entity Name: ALL FOR YOU LANDSCAPE AND MAINTENANCE INC.

Current Principal Place of Business:

6051 N. US 1
FORT PIERCE, FL 34981

New Principal Place of Business:

6051 N. US 1
FORT PIERCE, FL 34946

Current Mailing Address:

6051 N. US 1
FORT PIERCE, FL 34981

New Mailing Address:

6051 N. US 1
FORT PIERCE, FL 34946

FEI Number: 20-2088311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIS, KIMBERLY
3475 OLD EDWARDS ROAD
FORT PIERCE, FL 34981 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIS, KIMBERLY
Address: 3475 OLD EDWARDS ROAD
City-St-Zip: FORT PIERCE, FL 34981

Title: V () Delete
Name: WILLIS, JUSTIN
Address: 3475 OLD EDWARDS ROAD
City-St-Zip: FORT PIERCE, FL 34981

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 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: KIMBERLY WILLIS

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date