

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000002195

FILED
Dec 08, 2006
Secretary of State

Entity Name: GREEN LEAF LAWN MAINTENANCE, INC.

Current Principal Place of Business:

5400 SAND LAKE DRIVE
MELBOURNE, FL 32934

New Principal Place of Business:

2800 ALLEN HILL DRIVE
MELBOURNE, FL 32940

Current Mailing Address:

5400 SAND LAKE DRIVE
MELBOURNE, FL 32934

New Mailing Address:

2800 ALLEN HILL DRIVE
SUITE A
MELBOURNE, FL 32940

FEI Number: 04-3803540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, EDWIN WD
5400 SAND LAKE DRIVE
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

CLINE, MELINDA J
2800 ALLEN HILL DRIVE
SUITE A
MELBOURNE, FL 32940 US

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: MELINDA J. CLINE

12/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ROSE, EDWIN W.D.
Address: 5400 SAND LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: VP (X) Delete
Name: ROSE, STEVEN
Address: 5400 SAND LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: ST (X) Delete
Name: ROSE, CHERYL
Address: 5400 SAND LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLINE, MELINDA J
Address: 2800 ALLEN HILL DRIVE, SUITE A
City-St-Zip: MELBOURNE, FL 32940

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: MELINDA J. CLINE

PD

12/08/2006

Electronic Signature of Signing Officer or Director

Date