· 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

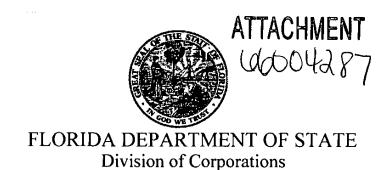
SIGNATURE AND TYPED OR P

## Mar 09, 2006 8:00 am **Secretary of State DOCUMENT # P05000015409** 1. Entity Name 02-17-2006 90077 012 \*\*\*150.00 MIKE CLEMONS LANDSCAPING, INC Principal Place of Business Mailing Address 12570 WATER LANE FT MYERS FL 33908 12570 WATER LANE FT MYERS FL 33908 2570 WAter 2. Principal Place of Business 3. Mailing Address 1 65 70 w HER / Acry Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) 4. FEI Number Applied For jour 812 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Count Fee Required 6. Name and Address of Current Registered Agent .7. Name and Address of New Registered Agent CLEMONS, MIKE Street Address (P.O. Box Number is Not Acceptable) 12570 WATER LANE FT MYERS FL 33908 City Zip Code FL 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 Signature, types or printed name of registered agent and late a applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. HILE PVST ☐ Delete TITLE ☐ Change ☐ Addition NAME CLEMONS, MIKE NAME STREET ADDRESS 12570 WATER LANE STREET ADDRESS CITY - ST - ZIP FT MYERS FL 33908 CITY-ST-7IP MUE ☐ Delete WLE ☐ Change Addition NAME HANGE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete THILE IIILI ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CIFY-ST-7IP CITY-ST-ZP Change TILE ☐ Defete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete DILC TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and than my signature shall have the same legal effect as it made upder oath; that I am an officer or director of the corporation or the receiver or further where the segule this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with address, with all other like empowered. SIGNATURE:

G OFFICER OR DIRECTOR

FILED

Daveme Phone #



February 21, 2006

MIKE CLEMONS LANDSCAPING, INC 12570 WATER LANE FT MYERS, FL 33908

Subject: MIKE CLEMONS LANDSCAPING, INC

Reference Number:

P05000015409

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION