


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 09, 2006 8:00 am
Secretary of State
02-17-2006 90077 012 ***150.00

DOCUMENT # P05000015409 1. Entity Name MIKE CLEMONS LANDSCAPING, INC			
Principal Place of Business 12570 WATER LANE FT MYERS FL 33908 <i>12570 water lane</i>		Mailing Address 12570 WATER LANE FT MYERS FL 33908	
2. Principal Place of Business <i>SAMB</i>		3. Mailing Address <i>12570 water lane</i>	
Suite, Apt. #, etc. <i>SAMB</i>		Suite, Apt. #, etc. 	
City & State <i>FL Fort Myers</i>		City & State <i>FL Fort Myers</i>	
Zip <i>33908</i>		Country <i>USA</i>	
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLEMONS, MIKE 12570 WATER LANE FT MYERS FL 33908		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 is applicable (NOTE: Registered Agent signature required when re-appointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PVST <input type="checkbox"/> Delete NAME CLEMONS, MIKE STREET ADDRESS 12570 WATER LANE CITY - ST - ZIP FT MYERS FL 33908	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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: <i>Mike Clemons</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>3/6/06</i> <small>Dating Phrase</small>	



ATTACHMENT

66004287

FLORIDA DEPARTMENT OF STATE
Division of Corporations

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 **has not been filed** 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.

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ANNUAL REPORTS SECTION