

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021017

FILED  
Jul 12, 2006  
Secretary of State

**Entity Name:** GROWING CONCERNS LANDSCAPE, DESIGN AND CONSTRUCTION, INC.

**Current Principal Place of Business:**

12501 BARRINGTON COURT  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

12501 BARRINGTON COURT  
FORT MYERS, FL 33908

**New Mailing Address:**

PO BOX 08053  
FORT MYERS, FL 33908

**FEI Number:** 20-2340785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ADAMS, HAL  
12860 S. CLEVELAND AVENUE  
BOX 134  
FORT MYERS, FL 339073822 US

**Name and Address of New Registered Agent:**

ADAMS, HAL  
1642 MEDICAL LANE  
A  
FORT MYERS, FL 33907 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: HAL ADAMS

07/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LAVALLE, ANTHONY  
Address: 12501 BARRINGTON COURT  
City-St-Zip: FORT MYERS, FL 33908

Title: ST ( ) Delete  
Name: LAVALLE, LAURA  
Address: 12501 BARRINGTON COURT  
City-St-Zip: FORT MYERS, FL 33908

**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 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: LAURA L. LAVALLE

ST

07/12/2006

Electronic Signature of Signing Officer or Director

Date