2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 21, 2006 8:00 am Secretary of State DOCUMENT # P05000058905 04-21-2006 90118 027 ***158.75 1. Entity Name SHATTUCK LAWN & LANDSCAPE, INC. Principal Place of Business Mailing Address 50014598 **441 HARTLEY STREET 441 HARTLEY STREET** MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Apt # etc 01062006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For この -ろんろクタイプ Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAUSLER, GARY J 950 N COLLIER BLVD SUITE 301 Street Address (P.O. Box Number is Not Acceptable) MARCO ISLAND, FL 34145 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Addition ☐ Delete TITLE ☐ Change SHATTUCK, KEVIN NAME NAME SHATTUCK KEVIN 441 HARTLEY ST STREET ADDRESS **441 HARTLEY STREET** STREET ADDRESS MARCO ISLAND, FL 34145 S/T SHATTUCK, GERTRUDE Change CITY-ST-ZIP MARCO ISLAND, FL 34145 CITY-ST-ZIP TITLE ☐ Delete 2-Addition TITLE NAME NAME 441 HARTLEY ST. STREET ADDRESS STREET ADDRESS MARGO ISLAND, FL 34145 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE-☐ Delete ☐ Change — ☐ Addition SHATTOUCK WAYNE IL. NAME NAME 441 HARRICEY ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARCO ISLAND, R 34145 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ΠΠF ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ___ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 embowered 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 attactiment with an address, with all other like empowered.

SHATTURK 04/18/06

FILED