

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 04, 2008 8:00 am**  
**Secretary of State**

06-04-2008 90003 019 \*\*\*150.00

**DOCUMENT # P05000084015**

1. Entity Name

**G & J TREE & LAWN SERVICE INC.**



Principal Place of Business

30947 VISTAVIEW AVE.  
MT. DORA FL 32757

Mailing Address

30947 VISTAVIEW AVE.  
MT. DORA FL 32757

2. Principal Place of Business - No P.O. Box #

**7173 Scott Av.**

3. Mailing Address

**P.O. Box 8**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Tangerine, Fla.**

City & State

**Tangerine, Fla.**

Zip

**32777**

Country

**Orange**

Zip

**32777**

Country

**Orange**

4. FEI Number

**34-2049509**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/07)



6. Name and Address of Current Registered Agent

**PORTER, GLENN**  
**30947 VISTAVIEW AVE.**  
**MT. DORA FL 32757**

7. Name and Address of New Registered Agent

Name **Porter, Glenn**

Street Address (P.O. Box Number is Not Acceptable)

**904 Marion Dr**

~~Porter, Glenn~~ **DR G.P.**

City

**MT DORA**

FL

Zip Code

**32**

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

**Glenn Porter**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**5-21-08**

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2008 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PORTER, GLENN	
STREET ADDRESS	30947 VISTAVIEW AVE.	
CITY-ST-ZIP	MT. DORA FL 32757	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	PORTER, JOHN	
STREET ADDRESS	30947 VISTAVIEW AVE.	
CITY-ST-ZIP	MT. DORA FL 32757	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Porter Glenn	
STREET ADDRESS	P.O. Box 8	
CITY-ST-ZIP	Tangerine, Fla. 32777	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Porter John	
STREET ADDRESS	P.O. Box 8	
CITY-ST-ZIP	Tangerine, Fla. 32777	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 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:

**Glenn Porter** **Glenn Porter**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5-20-08**

Date

Daytime Phone #

ATTACHMENT

40107514

# 06000084015

Office 352-735-  
6030

This paper was  
in our tax papers  
and the account did  
not see till after the  
Fact we are truly sorry  
for Being late and we  
also needed to change  
our address which we  
did on the paper work.

~~The~~ The accounting  
also had to get a exticion  
on our taxes so this is  
why we just <sup>got</sup> call our  
paperwork Back.

We are sending a Check  
for \$150.00 If you need  
to talk to me just call  
the office and they will get  
me a message.

Thank you  
Aleem Victor