


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000086549</b> 1. Entity Name <b>D&amp;M LAWN MAINTENANCE SERVICES, INC.</b>	
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Principal Place of Business  
**3806 AVENUE S  
FORT PIERCE, FL 34947**

Mailing Address  
**3806 AVENUE S  
FORT PIERCE, FL 34947**



03112007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>85-1682276</b>	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**YOUNG, MARGUERITE  
3806 AVENUE S  
FORT PIERCE, FL 34947**

**DO NOT WRITE  
IN THIS SPACE**

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	YOUNG, MARGUERITE
STREET ADDRESS	3806 AVENUE S
CITY-ST-ZIP	FORT PIERCE, FL 34947
TITLE	VP
NAME	YOUNG, DOUGLAS
STREET ADDRESS	3006 CARVER STREET
CITY-ST-ZIP	FORT PIERCE, FL 34950
TITLE	S/T
NAME	RICHARDSON, SHAREKA D
STREET ADDRESS	3806 AVENUE S
CITY-ST-ZIP	FORT PIERCE, FL 34947
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000688264  
04/10/07-80073-006 158.75

**DO NOT WRITE  
IN THIS SPACE**

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 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: Marguerite Young  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-07 (772)948-4442  
Date Daytime Phone #