## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000107478

Entity Name: JMC LAWN CARE, INC.

FILED Jul 10, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12198 CAPTIVA BLUFF CIRCLE WEST JACKSONVILLE, FL 32226 **Current Mailing Address: New Mailing Address:** 12198 CAPTIVA BLUFF CIRCLE WEST JACKSONVILLE, FL 32226 FEI Number: 20-3239313 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRONG, RONALD L 16 SEMINOLE ROAD ATLANTIC BEACH, FL 32233 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCMILLIAN, JOHN Name: Name: 12198 CAPTIVA BLUFF CIRCLE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: MCMILLIAN, TERESA Name: 12198 CAPTIVA BLUFF CIRCLE WEST Address: Address: JACKSONVILLE, FL 32226 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MCMILLIAN, JOHN Name: Name: 12198 CAPTIVA BLUFF CIRCLE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition MCMILLIAN, TÉRESA Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: JOHN MCMILLIAN P 07/10/2007

12198 CAPTIVA BLUFF CIRCLE WEST

JACKSONVILLE, FL 32226

Address:

City-St-Zip: