2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110154

Entity Name: COLEMAN'S LANDSCAPING, INC

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3609 OLD WINTER GARDEN RD B-8,9,10 ORLÁNDO, FL 32805 **New Mailing Address: Current Mailing Address:** P.O.BOX 551480 ORLANDO, FL 32855 US FEI Number: 76-0800410 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: COLEMAN, CLARENCE JR COLEMAN, CLARENCE P. 159 SHEELER AVE 3609 OLD WINTER GARDEN RD APOPK, FL 32703 B- 8,9,10 ORLÁNDO, FL 32805 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: CLARENCE COLEMAN 02/11/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition COLEMAN, CLARENCE JR Name: Name: P.O.BOX 551480 Address: Address: City-St-Zip: ORLANDO, FL 32855 US City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: BECERRA, ARMANDO Name: 321 SABINAL STREET Address: Address: OCOEE, FL 34761 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: CLARENCE COLEMAN 02/11/2009