

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133894

FILED
Apr 30, 2007
Secretary of State

Entity Name: BILL PELKEY'S LAWN CARE INC

Current Principal Place of Business:

639 E. 11TH AVE
MT. DORA, FL 32757 US

New Principal Place of Business:

2403 NORTHLAND RD
MT. DORA, FL 32757 US

Current Mailing Address:

639 E. 11TH AVE
MT. DORA, FL 32757 US

New Mailing Address:

2403 NORTHLAND RD
MT. DORA, FL 32757 US

FEI Number: 20-3615890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELKEY, WILLIAM
639 E. 11TH AVE
MT. DORA, FL 32757 US

Name and Address of New Registered Agent:

PELKEY, WILLIAM
2403 NORTHLAND RD
MT. DORA, FL 32757 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PELKEY, WILLIAM
Address: 639 E. 11TH AVE
City-St-Zip: MT. DORA, FL 32757 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PELKEY, WILLIAM
Address: 2403 NORTHLAND RD
City-St-Zip: MT. DORA, FL 32757 US

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.

SIGNATURE: WILLIAM SCOTT PELKEY

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date