

2006 FOR PROFIT CORPORATION ANNUAL REPORT



FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90043 045 ***150.00

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01222006 Chg-P CR2E034 (11/05)

DOCUMENT # P05000149822			
1. Entity Name STRICTLY GREEN LAWNS, INC.			
Principal Place of Business 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470		Mailing Address 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470	
2. Principal Place of Business 186 Dove Circle Suite, Apt. #, etc.		3. Mailing Address 186 Dove Circle Suite, Apt. #, etc.	
City & State Roxal Palm Beach FL		City & State Roxal Palm Beach FL	
Zip 33411	Country Palm Beach	Zip 33411	Country Palm Beach
4. FEI Number 20-4250531		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NADEAU, SCOTT D 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 186 Dove Circle City Roxal Palm Beach FL Zip Code 33411	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NADEAU, SCOTT D 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 186 Dove Circle Roxal Palm Beach FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NADEAU, AARON A 186 DOVE CIRCLE ROYAL PALM BEACH, FL 33411 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC NADEAU, SCOTT D 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 186 Dove Circle Roxal Palm Beach FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES STOETZEL, ASHLEY F 17716 36TH COURT NORTH LOXAHATCHEE, FL 33470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 186 Dove Circle Roxal Palm Beach FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		President 2/1/06 561-329-4211	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	