2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157255

Entity Name: WE DO IT ALL LAWN SERVICE, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3948 SUNBEAM ROAD 4600 TOUCHTON RD BLDG. 100 STE. 150 JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

4600 TOUCHTON RD 3948 SUNBEAM ROAD BLDG. 100 STE. 150 JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32246

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALLEN, LYNETTE ALLEN, LYNETTE 3948 SUNBEAM ROAD 4600 TOUCHTON RD BLDG. 100 STE. 150 JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32246 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: LYNETTE ALLEN 04/25/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ALLEN, LYNETTE ALLEN, LYNETTE Name: Name:

3948 SUNBEAM ROAD STE 2 4600 TOUCHTON RD. BLDG. 100 STE. 150 Address: Address:

City-St-Zip: JACKSOVNILLE, FL 32257 City-St-Zip: JACKSOVNILLE, FL 32246

Title: Title: () Delete (X) Change () Addition

Name: ALLEN, DAVID Name: ALLEN, DAVID S

3948 SUNBEAM ROAD STE 2 4600 TOUCHTON RD. BLDG. 100 STE. 150 Address: Address:

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32246 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: LYNETTE ALLEN 04/25/2007