

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000168110

Entity Name: PRO CARE LAWN & SHRUB. INC.

FILED
Sep 19, 2007
Secretary of State

Current Principal Place of Business:

11637 COLUMBIA PARK DRIVE EAST, SUITE 3
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 24746
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number: 20-4361558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAGUE & JESPERSON, P.A.
3955 RIVERSIDE AVENUE
SUITE 100
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

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: BARBARA LEAGUE

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: UNDERWOOD, STEVE
Address: 11637 COLUMBIA PARK DRIVE EAST, SUITE 3
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP () Delete
Name: DAVIDSON, RICHARD
Address: 11637 COLUMBIA PARK DRIVE EAST, SUITE 3
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: STEVE UNDERWOOD

PRES

09/19/2007

Electronic Signature of Signing Officer or Director

Date