

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000071414

FILED
Aug 20, 2009
Secretary of State

Entity Name: RATHEL LAWN MAINTENANCE & LANDSCAPING, INC.

Current Principal Place of Business:

14511 FARM HILLS PL
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 342444
TAMPA, FL 33694

New Mailing Address:

FEI Number: 20-4919084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RATHEL, JAMES W II
14511 FARM HILLS PL
TAMPA, FL 33625 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RATHEL, JAMES W II
Address: 14511 FARM HILLS PL
City-St-Zip: TAMPA, FL 33625

Title: VP () Delete
Name: RATHEL, DEBORAH S
Address: 14511 FARM HILLS PL
City-St-Zip: TAMPA, FL 33625

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: BAUER, JASON C
Address: 9822 JAMES ST.
City-St-Zip: THONOTOSASSA, FL 33592

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: JAMES RATHEL II

P

08/20/2009

Electronic Signature of Signing Officer or Director

Date