

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000119038

FILED
May 27, 2009
Secretary of State

Entity Name: UNITED LAWNSCAPE OF FLORIDA, INC.

Current Principal Place of Business:

6088 LEE ANN LANE
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

6088 LEE ANN LANE
NAPLES, FL 34109

New Mailing Address:

FEI Number: 20-5537073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECKHARDT, KEVIN
6088 LEE ANN LN
NAPLES, FL 34109 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LANGWEROWSKI, MARK G
Address: 62170 VAN DYKE
City-St-Zip: WASHINGTON TOWNSHIP, MI 48904

Title: D () Delete
Name: ORLOWSKI, BRIAN J
Address: 19505 QUESADA AVENUE,THE OAKS IV UNIT 2413
City-St-Zip: PORT CHARLOTTE, FL 339483122

Title: D () Delete
Name: ECKHARDT, KEVIN B
Address: 19505 QUESADA AVENUE,THE OAKS IV UNIT 2413
City-St-Zip: PORT CHARLOTTE, FL 339483122

Title: D () Delete
Name: LAGRASSO, SALVATORE F
Address: 62170 VAN DYKE
City-St-Zip: WASHINGTON TOWNSHIP, MI 48094

Title: D () Delete
Name: WERNIS, JOHN A
Address: 62170 VAN DYKE
City-St-Zip: WASHINGTON TOWNSHIP, MI 48094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LANGWEROWSKI, MARK G
Address: 7960 GRAND RIVER RD.
City-St-Zip: BRIGHTON, MI 48114 US

Title: D (X) Change () Addition
Name: ORLOWSKI, BRIAN J
Address: 12835 IVORY STONE LOOP
City-St-Zip: FORT MYERS, FL 33913 US

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

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: KEVIN ECKHARDT

D

05/27/2009

Electronic Signature of Signing Officer or Director

Date