

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000730

FILED
Mar 05, 2008
Secretary of State

Entity Name: BRYAN'S LAWN CARE SERVICE, INC.

Current Principal Place of Business:

145 SWEETWATER CIRCLE
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

145 SWEETWATER CIRCLE
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 20-8151788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, FRANCES C P.A.
3119-B CRAWFORDVILLE HIGHWAY
CRAWFORDVILLE, FL 32327 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. () Change (X) Addition
Name: CAMP, BRYAN L
Address: 145 SWEETWATER CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MRS () Change (X) Addition
Name: CAMP, SUZANNE S
Address: 145 SWEETWATER CIRCLE
City-St-Zip: CRAWFORDVILLE, FL 32327

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: SUZANNE S. CAMP

MRS.

03/05/2008

Electronic Signature of Signing Officer or Director

Date