

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000008803

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** BAILEY'S LAWN CARE SERVICE, INC.

**Current Principal Place of Business:**

947 W. WHEELER RD.  
BRANDON, FL 33510

**New Principal Place of Business:**

34742 HILLOCK DR  
DADE CITY, FL 33523

**Current Mailing Address:**

947 W. WHEELER RD.  
BRANDON, FL 33510

**New Mailing Address:**

34742 HILLOCK DR  
DADE CITY, FL 33523

**FEI Number:** 41-2229440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR JR., ROBERT E. ESQ.  
602 1/2 SOUTH BLVD.  
LAW OFFICES OF R.E. TAYLOR, P.A.  
TAMPA, FL 33606 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: PSVT  
Name: BAILEY, MIKE A.  
Address: 34742 HILLOCK DR  
City-St-Zip: DADE CITY, FL 33523

Title: SEC  
Name: COX, CONNIE S.  
Address: 398 KRISTI DR  
City-St-Zip: LEESBURG, FL 34788

I hereby 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 all other like empowered.

SIGNATURE: CONNIE COX

SEC

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date