

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000076063

FILED
Jan 29, 2009
Secretary of State

Entity Name: JASPER JAMES CARTER LAWNCARE INC

Current Principal Place of Business:

8800 TOWNSQUARE DR SOUTH
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

8800 TOWNSQUARE DR SOUTH
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 26-0465219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, JASPER J
8800 TOWNSQUARE DR SOUTH
JACKSONVILLE, FL 32216 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: JASPER J CARTER

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: P/S () Delete
Name: CARTER, JASPER J
Address: 8800 TOWNSQUARE DR SOUTH
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VP () Delete
Name: CHASTAIN, DAVID
Address: 2610 STATE RD A1A APT 206
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: VP () Delete
Name: RENTA, DAMIEN
Address: 422 FILMORE DR
City-St-Zip: JACKSONVILLE, FL 32225 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JASPER J CARTER

P/S

01/29/2009

Electronic Signature of Signing Officer or Director

Date