

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000085499

FILED  
Jun 28, 2009  
Secretary of State

Entity Name: TWO BROTHERS TOTAL LAWN CARE, INC.

**Current Principal Place of Business:**

21 PONCE DELEON DRIVE  
PALM COAST, FL 32164 US

**New Principal Place of Business:**

**Current Mailing Address:**

21 PONCE DELEON DRIVE  
PALM COAST, FL 32164 US

**New Mailing Address:**

FEI Number: 26-0608377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DONALD APPIGNANI ATTORNEY AT LAW  
4300 N. UNIVERSITY DRIVE  
D-106  
LAUDERHILL, FL 33351 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: P ( ) Delete  
Name: MCMORROW, JOHN  
Address: 21 PONCE DELEON DRIVE  
City-St-Zip: PALM COAST, FL 32164 US

Title: VP ( ) Delete  
Name: MCMORROW, JUSTIN  
Address: 13 UPSHIRE PATH  
City-St-Zip: PALM COAST, FL 32164

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JUSTIN MCMORROW

VP

06/28/2009

Electronic Signature of Signing Officer or Director

Date