

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000103011

FILED  
Apr 29, 2012  
Secretary of State

Entity Name: MOW TECH PROFESSIONAL LAWN CARE, INCORPORATED

**Current Principal Place of Business:**

7777 NORMANDY BLVD  
APT # 613  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

4358 TIMUQUANA RD  
UNIT 144  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

7777 NORMANDY BLVD  
APT # 613  
JACKSONVILLE, FL 32221

**New Mailing Address:**

4358 TIMUQUANNA RD  
UNIT 144  
JACKSONVILLE, FL 32210

FEI Number: 26-1170065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TILLMAN, JOHN V  
7777 NORMANDY BLVD  
APT# 613  
JACKSONVILLE, FL 32221 US

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

TILLMAN, JOHN V  
4348 TIMUQUANNA RD  
UNIT 144  
JACKSONVILLE, FL 32210 US

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

04/29/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: TILLMAN, JOHN V  
Address: 4358 TIMUQUANA RD UNIT 144  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VPS  
Name: TILLMAN, KENNA I  
Address: 4358 TIMUQUANA RD UNIT 144  
City-St-Zip: JACKSONVILLE, FL 32210

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: JOHN TILLMAN

PT

04/29/2012

Electronic Signature of Signing Officer or Director

Date