

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000118529

FILED
Mar 25, 2009
Secretary of State

Entity Name: YOU BET YOUR GRASS TOTAL LAWN CARE SERVICE, INC.

Current Principal Place of Business:

32904 CR 437
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 45
MOUNT DORA, FL 32756 US

New Mailing Address:

32904 CR 437
SORRENTO, FL 32776 US

FEI Number: 26-1685248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSI, JONATHAN D
32904 CR 437
SORRENTO, FL 32776 US

Name and Address of New Registered Agent:

STEVEN A. SPENCER AND ASSOCIATES
1900 E. ROBINSON ST.
ORLANDO, FL 32803 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: STEVEN A. SPENCER

03/25/2009

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: PS D () Delete
Name: ROSSI, JONATHAN
Address: PO BOX 452
City-St-Zip: MOUNT DORA, FL 32756 US

Title: VP D (X) Delete
Name: STEELE, SIDNEY
Address: 32904 CR 437
City-St-Zip: SORRENTO, FL 32776 US

Title: T (X) Delete
Name: STEELE, ELIZABETH
Address: 32904 CR 437
City-St-Zip: SORRENTO, FL 32776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS D (X) Change () Addition
Name: STEELE, SIDNEY L
Address: 32904 CR 437
City-St-Zip: SORRENTO, FL 32776 US

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: STEVEN A. SPENCER

RA

03/25/2009

Electronic Signature of Signing Officer or Director

Date