

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000128305

FILED
Jan 10, 2009
Secretary of State

Entity Name: COMMUNITY PRIDE LAWN CARE, INCORPORATED

Current Principal Place of Business:

7617 PIPING ROCK COURT
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

8025 SYCAMORE DR
NEW PORT RICHEY, FL 34654

Current Mailing Address:

PO BOX 1766
NEW PORT RICHEY, FL 34656

New Mailing Address:

FEI Number: 26-1342599 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANDES, MARIA
7617 PIPING ROCK COURT
NEW PORT RICHEY, FL 34654 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRANDES, MARIA
Address: 7617 PIPING ROCK COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: V () Delete
Name: BRANDES, RANDY
Address: 7617 PIPING ROCK COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S () Delete
Name: LAFONTAINE, JEFFREY
Address: 7617 PIPING ROCK COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRANDES, MARIA
Address: 8025 SYCAMORE DR
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: V (X) Change () Addition
Name: BRANDES, RANDY
Address: 8025 SYCAMORE DR
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S (X) Change () Addition
Name: LAFONTAINE, JEFFREY
Address: 8025 SYCAMORE DR
City-St-Zip: NEW PORT RICHEY, FL 34654

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: MARIA BRANDES

PRES

01/10/2009

Electronic Signature of Signing Officer or Director

_____ Date