2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133616

FILED
Aug 26, 2009
Secretary of State

Entity Name: INVISION LAWN CARE AND LANDSCAPING, INC

Current Principal Place of Business:

3539 APALACHEE PKY
3-205
TALLAHASSEE,, FL 32311

New Principal Place of Business:

Current Mailing Address:

3539 APALACHEE PKY
3-205
TALLAHASSEE,, FL 32311

New Mailing Address:

FEI Number: 26-1602013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, TERESA I
5260 NW 55 BLVD
302
COCONUT CREEK, FL 33073 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: CEO ( ) Delete
Name: WALKER, HAROLD L
Address: 3539 APALACHEE PKY, SUITE 3-205
City-St-Zip: TALLAHASSEE,, FL 32311

Title: VP ( ) Delete
Name: SMITH, GLORIA B
Address: 3539 APALACHEE PKY, SUITE 3-205
City-St-Zip: TALLAHASSEE,, FL 32311

Title: P ( ) Delete
Name: MILLER, TERESA I
Address: 3539 APALACHEE PKY, SUITE 3-205
City-St-Zip: TALLAHASSEE,, FL 32311

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: HAROLD L WALKER CEO 08/26/2009
Electronic Signature of Signing Officer or Director Date