2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# P08000032019

Entity Name: AVALAWN LANDSCAPING OF THE FLORIDA KEYS INC.

Current Principal Place of Business:

92 BAY DR.
KEY WEST, FL 33040

New Principal Place of Business:

1010 VONPHISTER ST
#3
KEY WEST, FL 33040

Current Mailing Address:

92 BAY DR.
KEY WEST, FL 33040

New Mailing Address:

1010 VONPHISTER ST
#3
KEY WEST, FL 33040

FEI Number: 26-2403013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BONA, DESIREE
92 BAY DR.
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

AREYZAGA, DOMINICA F
1010 VONPHISTER ST
#3
KEY WEST, FL 33040 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: DOMINICA AREYZAGA 04/09/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: 2 ( ) Delete
Name: AREYZAGA, DANIEL
Address: 1010 VON PHISTER LANE
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: FEIGENBAUM, JAMES G
Address: 92 BAY DR.
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: BONA, ANTHONY M
Address: 92 BAY DR.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: AREYZAGA, DANIEL H
Address: 1010 VON PHISTER ST #3
City-St-Zip: KEY WEST, FL 33040

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: DANIEL H AREYZAGA D 04/09/2009
Electronic Signature of Signing Officer or Director Date