

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067048

Entity Name: FRONT LINE LAWN CARE, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

9719 NW 240TH TERRACE
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

9719 NW 240TH TERRACE
ALACHUA, FL 32615

New Mailing Address:

FEI Number: 29-2985816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HURLOCKER, MICHAEL
26302 SW 1ST AVE
NEWBERRY, FL 32669 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: HURLOCKER, MICHAEL
Address: 26302 SW 1ST AVE
City-St-Zip: NEWBERRY, FL 32669

Title: VP () Delete
Name: RITTER, BRIAN
Address: 9719 NW 240TH TERRACE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRIAN RITTER

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date