

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000091681

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** ROBERT'S LAWN AND LANDSCAPING SERVICES, INC.

**Current Principal Place of Business:**

6235 COLISEUM BLVD. P  
PORT CHARLOTTE, FL 33981

**New Principal Place of Business:**

2111 REDMOND STREET  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

6235 COLISEUM BLVD. P  
PORT CHARLOTTE, FL 33981

**New Mailing Address:**

2111 REDMOND STREET  
PORT CHARLOTTE, FL 33948

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ORGERONE, ROBERT K  
6235 COLISEUM BLVD. P  
PORT CHARLOTTE, FL 33981 US

**Name and Address of New Registered Agent:**

ORGERONE, ROBERT K  
2111 REDMOND ST  
PORT CHARLOTTE, FL 33948 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: ROBERT K. ORGERONE

01/20/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ORGERONE, ROBERT K  
Address: 6235 COLISEUM BLVD. P  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VD (X) Delete  
Name: CORMIER, JOSHUA J  
Address: 6235 COLISEUM BLVD. P  
City-St-Zip: PORT CHARLOTTE, FL 33981

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: ORGERONE, ROBERT K  
Address: 2111 REDMOND ST.  
City-St-Zip: PORT CHARLOTTE, FL 33948

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: ROBERT K. ORGERONE

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date