

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000093012

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: NATIVE FLORIDA LANDCARE INC.

## Current Principal Place of Business:

80 PONDELLA RD STE #G  
NORTH FORT MYERS, FL 33903

## New Principal Place of Business:

80 PONDELLA RD  
SUITE G  
NORTH FORT MYERS, FL 33903 US

## Current Mailing Address:

80 PONDELLA RD STE #G  
NORTH FORT MYERS, FL 33903

## New Mailing Address:

80 PONDELLA RD  
SUITE G  
NORTH FORT MYERS, FL 33903 US

FEI Number: 90-0474985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHIDDEN, BILLIE J  
80 PONDELLA RD STE #G  
NORTH FORT MYERS, FL 33903 US

## Name and Address of New Registered Agent:

WHIDDEN, BILLIE J PTS  
80 PONDELLA RD  
SUITE G  
NORTH FORT MYERS, FL 33903 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: BILLIE JO WHIDDEN

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete  
Name: WHIDDEN, BILLIE J  
Address: 80 PONDELLA RD STE #G  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: V ( ) Delete  
Name: LEMAR, MICHAEL JR  
Address: 80 PONDELLA RD STE #G  
City-St-Zip: NORTH FORT MYERS, FL 33903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition  
Name: WHIDDEN, BILLIE J PTS  
Address: 80 PONDELLA RD STE #G  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: V (X) Change ( ) Addition  
Name: LEMAR, MICHAEL JR  
Address: 80 PONDELLA RD STE #G  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

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: BILLIE JO WHIDDEN

PTS

04/30/2009

Electronic Signature of Signing Officer or Director

Date