

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000021271

**FILED**  
**Mar 12, 2011**  
**Secretary of State**

**Entity Name:** A CUT ABOVE GROUND MAINTENANCE INC

**Current Principal Place of Business:**

405 77TH ST  
HOLMES BEACH, FL 34217

**New Principal Place of Business:**

**Current Mailing Address:**

405 77TH ST  
HOLMES BEACH, FL 34217

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

ALLEN, SHARON S  
405 77TH ST  
HOLMES BEACH, FL 34217    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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALLEN, SHARON S  
Address: 405 77TH ST  
City-St-Zip: HOLMES BEACH, FL 34217

Title: VP  
Name: ALLEN, WILLIAM O  
Address: 405 77TH ST  
City-St-Zip: HOLMES BEACH, FL 34217

I hereby 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 all other like empowered.

SIGNATURE: SHARON S ALLEN

P

03/12/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date