2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# P09000056190

Entity Name: EXCLUSIVE HOME & GARDEN CARE, INC.

Current Principal Place of Business:

540 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32828

New Principal Place of Business:

Current Mailing Address:

540 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32828

New Mailing Address:

FEI Number: 27-0468449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CALABRESE, PAULA
540 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32714 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: PD
Name: CALABRESE, ALEXIS
Address: PO BOX 161418
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: VPD
Name: CALABRESE, PAULA
Address: PO BOX 161418
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

Title: STD
Name: CALABRESE, MARYLOU
Address: PO BOX 161418
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

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: PAULA CALABRESE VPD 04/29/2011

Electronic Signature of Signing Officer or Director Date