

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000062918

FILED
Sep 13, 2011
Secretary of State

Entity Name: CHASE-N-WEEDES LAWN CARE INC.

Current Principal Place of Business:

483 WAKULLA SPRINGS RD
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

483 WAKULLA SPRINGS RD
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 30-0573752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOTES, RALPH T
483 WAKULLA SPRINGS RD
CRAWFORDVILLE, FL 32327 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: MOTES, RALPH T
Address: 483 WAKULLA SPRINGS RD
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V
Name: MOTES, LYND A
Address: 483 WAKULLA SPRINGS RD
City-St-Zip: CRAWFORDVILLE, FL 32327

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: RALPH T. MOTES

PRES

09/13/2011

Electronic Signature of Signing Officer or Director

Date