

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000056007

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** MCQUEEN'S COMPLETE LAWN SERVICES, INC.

**Current Principal Place of Business:**

1535 COURTLAND BLVD  
DELTONA, FL 32738

**New Principal Place of Business:**

**Current Mailing Address:**

1535 COURTLAND BLVD  
DELTONA, FL 32738

**New Mailing Address:**

**FEI Number:** 27-3205175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCQUEEN, ROBERT  
1535 COURTLAND BLVD  
DELTONA, FL 32738 US

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

MCQUEEN, ROBERT W  
1535 COURTLAND BLVD  
DELTONA, FL 32738 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 W. MCQUEEN

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MCQUEEN, ROBERT W  
**Address:** 1535 COURTLAND BLVD  
**City-St-Zip:** DELTONA, FL 32738

**Title:** VP  
**Name:** MCQUEEN, DORIS  
**Address:** 1535 COURTLAND BLVD  
**City-St-Zip:** DELTONA, FL 32738

**Title:** S  
**Name:** LAWRENCE, SHANTAVIA  
**Address:** 1535 COURTLAND BLVD.  
**City-St-Zip:** DELTONA, FL 32738

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:** ROBERT W. MCQUEEN

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date