

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000001384

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Entity Name:** TWO BROTHERS MOWING, INC.

**Current Principal Place of Business:**

20844 SULLIVAN RANCH BLVD  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

13238 WHITE CYPRESS ROAD  
ASTATULA, FL 34705

**Current Mailing Address:**

20844 SULLIVAN RANCH BLVD  
MOUNT DORA, FL 32757

**New Mailing Address:**

13238 WHITE CYPRESS ROAD  
ASTATULA, FL 34705

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

DILLON, CHRIS  
20844 SULLIVAN RANCH BLVD  
MOUNT DORA, FL 32757 US

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

DILLON, CHRIS  
13238 WHITE CYPRESS ROAD  
ASTATULA, FL 34705 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:

Electronic Signature of Registered Agent

01/13/2012

Date

**OFFICERS AND DIRECTORS:**

Title: OWNE  
Name: DILLON, CHRIS  
Address: 13238 WHITE CYPRESS ROAD  
City-St-Zip: ASTATULA, FL 34705

Title: CO-O  
Name: DILLON, MELISSA R  
Address: 13238 WHITE CYPRESS ROAD  
City-St-Zip: ASTATULA, FL 34705

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: CHRISTOPHER DILLON

OWN

01/13/2012

Electronic Signature of Signing Officer or Director

Date