

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000013208

FILED
Mar 27, 2012
Secretary of State

Entity Name: COASTAL LAWN CARE OF CITRUS COUNTY, INC.

Current Principal Place of Business:

4737 SOUTH SEA RAY POINT
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

4737 SOUTH SEA RAY POINT
LECANTO, FL 34461 US

New Mailing Address:

PO BOX 162
LECANTO, FL 34460 US

FEI Number: 27-4835958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSATO, JARED S
4737 SOUTH SEA RAY POINT
LECANTO, FL 34461 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: ROSATO, JARED S
Address: 4737 SOUTH SEA RAY POINT
City-St-Zip: LECANTO, FL 34461 US

Title: VP
Name: RADECKI, LAURA A
Address: PO BOX 423
City-St-Zip: LECANTO, FL 34460 US

Title: SECR
Name: RADECKI, LAURA A
Address: PO BOX 423
City-St-Zip: LECANTO, FL 34460 US

Title: TRES
Name: ROSATO, JARED S
Address: 4737 SOUTH SEA RAY POINT
City-St-Zip: LECANTO, FL 34461 US

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: LAURA RADECKI

VP

03/27/2012

Electronic Signature of Signing Officer or Director

Date