

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000035563

FILED  
Jan 11, 2009  
Secretary of State

**Entity Name:** ROBERT LEWANDA LANDSCAPE AND IRRIGATION, INC.

**Current Principal Place of Business:**

807 PLAYGROUND ROAD  
FORT WALTON BEACH, FL 32547 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 466  
SHALIMAR, FL 32579 US

**New Mailing Address:**

**FEI Number:** 59-3183410

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEWANDA, ROBERT J  
807 PLAYGROUND ROAD  
FORT WALTON BEACH, FL 32547 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LEWANDA, ROBERT J.  
Address: 807 PLAYGROUND RD.  
City-St-Zip: FT WALTON BCH, FL

Title: VP ( ) Delete  
Name: CATCHING, CAROL  
Address: 40 JONQUIL AVE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T ( ) Delete  
Name: WRIGHT, EDNA  
Address: 216 E COLLEGE BLVD.  
City-St-Zip: NICEVILLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: CATCHING, CAROL  
Address: 40 JONQUIL AVE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** CAROL L CATCHING

VP

01/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date