## 243

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

					_		_	1
DOCUMENT # P 94000060780 1. Entity Name								*
Complete Lawn Care of Lee County, Inc.					'   			
Principal Plac	ce of Business	Mailing Address		·	1			
64 Car	dinal Drive	64 Cardina	64 Cardinal Drive					
	yers, FL 33917	Fort Myers	Fort Myers, FL 33917					
-	, -	-				E ING 18811 <b>65</b> 14 1614 1614		ADRIEN DE LEGI
<u> </u>	Place of Business		1318 Lafayette St.					
Suite, Apt		Suite, Apt. #, etc.				Chg-P	CR2E034 (10/03)	· · · · · · · · · · · · · · · · · · ·
City & Stat	<u> </u>	<del></del>	Cape Coral, FL			0510163	٨	pplied For lot Applicable
* Zip	Country	Zip 33904	Caun	try J <b>SA</b>	5. Certificate of Status Desir		S8.75 Ad Fee Requir	
	6. Name and Address of Current			N		d Address of New Re	egistered Agent	
	son, Homer		Name Johnson, Homer					
	ardinal Drive		Street Address		(P.O. Box Numb	er is Not Acceptable	)	
Fort	Myers, FL 33917					ayette St.		
					Coral,	FL 33904		
				City			FL Zip Coo	de
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registere	ed office or registe	red agent, or bo	oth, in the State of Flor	ida. I am familiar with	and accept
SIGNATURE		<del>-</del>						
	Signature, typed or printed name of registered agent	and title if applicable. (NOT)	E Registered	d Agent signature required	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Campai Trust Fund Cont	-		.00 May Be led to Fees			
10.	OFFICERS AND	DIRECTORS	11.			CHANGES TO OFFIC	CERS AND DIRECTOR	IS IN 11
TITLE D	Johnson, Homer	☐ Delete	TITLE		•		🔀 Change	Addition
NAME STREET ADDRESS	·		NAME		hnson, l			
CITY-ST-ZIP					1318 Lafayette St. <u>Cape Coral, FL 3390</u>			
TITLE	<u> </u>	Daleta	TITLE	<b>I</b>			☐ Change	Addition
NAME			NAME	. o   ur	1318 Lafavotto St			- T-1
STREET ACCRESS			STREE		Cape Coral, FL 33904			
CiTY-ST-ZIP					cape Colar, FL 33904			
TITUE NAME		Delete	TITLE	1		•	☐ Change	☐ Addition
STREET ADDRESS				T ADDRESS				
CITY-ST-Z:P			CITY-	ST-ZiP				
TITUE		Oelete	TITLE				☐ Change	Addition
NAME STREET ADDRESS			NAME Stoce	T ADDRESS				
C:TY-ST-Z:P				ST-ZP				
Title		☐ Dalete	TITLE				☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			1	T ADCPESS ST-Z'P				
THELE		Deleta	TITLE				Change	Addition
NAME		~ Desc.e	NAME					_
STREET ADDRESS				T ACCRESS			•	
CITY-ST-ZP			L	ST-ZP			<del></del>	- <b>(</b>
indicated of the corp	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address v	true and accurate and that movered to execute this report a	ny signatu	ire shall have the s	same legal effec	t as if made under oa	th, that I am an officer appears in Block 10 o	or director r Block 11 if
SIGNATI		in Hell			5-	6-04	239-549-24	44
	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER (	OR DIRECTO	DR .		Date /	Daytime Phone #	





1318 Lafayette Street Cape Coral, FL 33904 (239) 549-2444 Fax: (239) 549-5623 www.hillcocpa.com Royal Palm Square 1400 Colonial Blvd., Suite 17 Fort Myers, FL 33907 (239) 433-2444 Fax: (239) 275-3917

August 6, 2004

Department of State Division of Reinstatement Department P.O. Box 6327 Tallahassee, FL 32314

RE: Complete Lawn Care of Lee County, Inc. Federal ID Number 65-0510163

Dear Sir/Madam:

Enclosed find Reinstatement Form and Annual Report for 2004. Our Client, Mr. Johnson moved from 64 Cardinal Drive, and therefore never received his annual report, and was not aware of this form not being received.

Enclosed find check in the amount of \$300.00 and ask that you accept same without any interest or penalties and reinstate the referenced corporation.

The current mailing address should be "1318 Lafayette Street, Cape Coral, Florida 33904".

Thank you for giving this matter your prompt attention.

Sincerely,

Thomas W. Hill

Hill & Company, CPA, P.A.

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Enclosures

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