

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000093890

FILED  
Feb 02, 2008  
Secretary of State

Entity Name: CLASSIC LAWNS OF BREVARD, INC.

## Current Principal Place of Business:

450 STAN DRIVE #16  
WEST MELBOURNE, FL 32904

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 62  
MELBOURNE, FL 32902

## New Mailing Address:

FEI Number: 59-3288165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLARK, COLLEEN A VP  
517 LANG RD SW  
PALM BAY, FL 32908 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: CLARK, STEVEN R  
Address: 517 LANG ROAD  
City-St-Zip: PALM BAY, FL 32908

Title: ST ( ) Delete  
Name: MARKS, ANITA J  
Address: 5950 S. SANFORD AVE.  
City-St-Zip: SANFORD, FL 32773

Title: VP ( ) Delete  
Name: CLARK, COLLEEN A  
Address: 171 WHITE RD SW  
City-St-Zip: PALM BAY, FL 32908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition  
Name: CLARK, COLLEEN A  
Address: 517 LANG RD SW  
City-St-Zip: PALM BAY, FL 32908

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: COLLEEN A CLARK

VP

02/02/2008

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

\_\_\_\_\_  
Date