


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000084423 1. Entity Name JOHN LOMBARDO LAWN SERVICE, INC.	
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Principal Place of Business 1400 NW 13 AVE. BOCA RATON, FL 33486	Mailing Address 1400 NW 13 AVE. BOCA RATON, FL 33486
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DO NOT WRITE IN THIS SPACE



03292006 No Chg-P CR2E034 (11/05)
4. FEI Number 65-0635237 Applied For
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOMBARDO, JOHN
1400 NW 13 AVE.
BOCA RATON, FL 33486

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOMBARDO, JOHN 1400 NW 13 AVE. BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOMBARDO, CATERINA 1400 NW 13 AVE. BOCA RATON, FL 33486
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05/17/06-80060-015 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **X 4-27-06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #