2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000093791

Title:

Name:

Address:

City-St-Zip:

tite Name: DOMANTO FARTUL AMANGARE

() Delete

FILED Nov 14, 2007 Secretary of State

Entity Name: DOWN TO EARTH LAWN CARE II, INC. **Current Principal Place of Business: New Principal Place of Business:** 27185 COUNTY ROAD 448A MOUNT DORA, FL 32757 **Current Mailing Address: New Mailing Address:** P.O. BOX 738 TANGERINE, FL 32777 FEI Number: 59-3346247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUERTA, ANTONIO A 380 CREÉKSTONE COURT LONGWOOD, FL 32779 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MOSLER, MICHAEL H Name: Name: 2239 ABRAMS ROAD Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HUERTA, ANTONIO A Name: 380 CREEKSTONE COURT Address: Address: LONGWOOD, FL 32779 City-St-Zip: City-St-Zip: Title: Title: T/S () Delete () Change () Addition SUTTON, DAVID S Name: Name: 946 VERSAILLES CIRCLE Address: Address: City-St-Zip: MAITLAND, FL 32751 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL H MOSLER VP 11/14/2007

() Change (X) Addition

BOUCHER, GREGORY A VP

ATLANTIC BEACH, FL 32233

1266 NANTUCKET DR