

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007185

Entity Name: TRI-COUNTY MOWING, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

577 N HATHAWAY AVE
BRONSON, FL 32621

New Principal Place of Business:

135 N HATHAWAY AVE
BRONSON, FL 32621

Current Mailing Address:

P O BOX 397
BRONSON, FL 32621

New Mailing Address:

FEI Number: 59-3358021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, TONY B
577 N HATHAWAY AVE
BRONSON, FL 32621 US

Name and Address of New Registered Agent:

LEHEW, JACK A
3750 GUNN HWY STE 207
TAMPA, FL 33618 US

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: JACK A LEHEW

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEEKS, TONY B
Address: 577 N HATHAWAY AVE
City-St-Zip: BRONSON, FL

Title: V () Delete
Name: WEEKS JR, TONY B
Address: 135 N HATHAWAY AVE PO BOX 1584
City-St-Zip: BRONSON, FL 32621

Title: S (X) Delete
Name: PEARSON, RACHEL F
Address: 4516 SW 44 LN
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEEKS, TONY B
Address: 135 N HATHAWAY AVE
City-St-Zip: BRONSON, FL

Title: SEC (X) Change () Addition
Name: PEARSON, RACHEL F
Address: 135 N HATHAWAY AVE
City-St-Zip: BRONSON, FL 32621

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: RACHEL F PEARSON

SEC

03/24/2009

Electronic Signature of Signing Officer or Director

Date