## 2007 FOR PROFIT CORPORATION

## FILED Mar 20, 2007 08:00 AM Secretary of State

ANNUAL REPURI					Socratory of Star			
DOCUMENT # P96000012808  1. Entity Name B & L LAWN MAINTENANCE, INC.					Secretary of Star			
Principal Ptac 10 BELLEME LARGO, FL 3		Mailing Address 10 BELLEMEADE CIRCLE LARGO, FL 33770				H 88381 3/818 11881 1811		
DO NOT WRITE IN THIS SPA				01192007	No Chg-P	CR2E034 (1	1/05)	
			CE	4. FEI Numb			Applied For Not Applicable	
				5. Certificati	e of Status Desired		75 Additional Required	
Name and Address of Current Registered Agent								
HAISLEY, JERRY 10 BELLEMEADE CIRCLE LARGO, FL 33770			DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for ions of registered agent  Signature, typed or printed name of registered agent is			gistered agent, or be	oth, in the State of Flo	orida. I am famili:	ar with, and accept	
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  -9. Election Campaign Final Trust Fund Contribution.			ncing _	\$5.00 May Be Added to Fees	00 May Be			
10.	OFFICERS AND I	DIRECTORS			·			
NAME STREET ADDRESS CITY-SI-ZIP	D HAISLEY, JERRY 10 BELLEMEADE CIRCLE LARGO, FL 33770		_					
NAME STREET ADDRESS CITY-ST-ZIP					U000 03/29/0	)0067333( )7-80025-	) -012 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				_	NOT W			
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	ACE		

12. Thereby certify that the information supplied with this filling 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 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPE OF PRINTED YAME OF SIGNING OFFICE OF DIRECTOR

Pers 3-16-07

Daytime Phone #