2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000098716

1. Entity Name
J&J LANDSCAPE AND DESIGN, INC.

FILED Apr 11, 2008 08:00 All Secretary of State

Principal Place of Business

Mailing Address

901 PALMETTO DR COCONUT CREEK, FL 33066 901 PALMETTO DR COCONUT CREEK, FL 33066



DO NOT WRITE IN THIS SPACE

04082008 N

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0721231 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NOONAN, JOHN 901 PALMETTO DR COCONUT CREEK, FL 33066

SIGNATURE:

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 Signature, typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	[· · · · · · · · · · · · · · · · · · ·	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NOONAN, JOHN 901 PALMETTO DR COCONUT CREEK, FL 33066		•		000000891583 04/23/08-80035-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NOONAN, KIMBERLY 901 PALMETTO DR COCONUT CREEK, FL 33066		ļ.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT WRITE THIS SPACE
NAME Street address City-St-Zip				IIN	INIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	. •				
12. I hereby 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attaphment with an address, with all other like empowered.					