

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067414

Entity Name: NAPLES LANDSCAPE, INC.

FILED  
Feb 02, 2009  
Secretary of State

## Current Principal Place of Business:

4084 PROGRESS AVENUE STE #6  
NAPLES, FL 34104

## New Principal Place of Business:

4084 ARNOLD AVEUNE #6  
NAPLES, FL 34104

## Current Mailing Address:

4084 PROGRESS AVENUE STE #6  
NAPLES, FL 34104

## New Mailing Address:

4084 ARNOLD AVENUE STE #6  
NAPLES, FL 34104

FEI Number: 59-3462967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAULKNER, JOHN DAVID  
4084 PROGRESS AVENUE SUITE #6  
NAPLES, FL 34104 US

## Name and Address of New Registered Agent:

FAULKNER, JOHN DAVID  
4084 ARNOLD AVENUE SUITE #6  
NAPLES, FL 34104 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:

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FAULKNER, JOHN DAVID  
Address: 3784 PROGRESS AVE #D  
City-St-Zip: NAPLES, FL 34104

Title: VP ( ) Delete  
Name: FAULKNER, COLLEEN  
Address: 3784 PROGRESS AVE #D  
City-St-Zip: NAPLES, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FAULKNER, JOHN DAVID  
Address: 4084 ARNOLD AVE #6  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change ( ) Addition  
Name: FAULKNER, COLLEEN  
Address: 4084 ARNOLD AVE #6  
City-St-Zip: NAPLES, FL 34104

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: COLLEEN FAULKNER

V P

02/02/2009

Electronic Signature of Signing Officer or Director

Date