

## **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000067414

**Entity Name:** NAPLES LANDSCAPE, INC.

**FILED**  
**Aug 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4084 ARNOLD AVEUNE #6  
NAPLES, FL 34104

**New Principal Place of Business:**

2991 12TH STREET NORTH  
NAPLES, FL 34103

**Current Mailing Address:**

4084 ARNOLD AVEUNE #6  
NAPLES, FL 34104

**New Mailing Address:**

PO BOX 9902  
NAPLES, FL 34101

**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 ARNOLD AVENUE SUITE #6  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

FAULKNER, JOHN DAVID  
2291 12TH STREET NORTH  
NAPLES, FL 34103 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: JOHN DAVID FAULKNER

08/08/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: FAULKNER, JOHN DAVID  
Address: PO BOX 9902  
City-St-Zip: NAPLES, FL 34101

I hereby 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 all other like empowered.

SIGNATURE: JOHN DAVID FAULKNER

PSTD

08/08/2011

Electronic Signature of Signing Officer or Director

Date