

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90341 045 ***150.00

DOCUMENT # P97000096612

1. Entity Name

E & C LANDSCAPING & LAWN SERVICE, INC.



Principal Place of Business

700 EAST CHAPMAN ROAD
OVIDO FL 32765

Mailing Address

700 EAST CHAPMAN ROAD
OVIDO FL 32765

2. Principal Place of Business

326 Carolyn Drive
Suite, Apt. #, etc.

3. Mailing Address

326 Carolyn Drive
Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/05)

City & State

Oviedo FL

City & State

Oviedo FL

4. FEI Number

59-3477947

Applied For

Not Applicable

Zip

32765

Country

Seminole

Zip

32765

Country

Seminole

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLOMSKY, EDWARD JR.
700 EAST CHAPMAN ROAD
OVIDO FL 32765

7. Name and Address of New Registered Agent

Name: Polomsky Edward Jr.
Street Address (P.O. Box Number is Not Acceptable): 326 Carolyn Drive
City: Oviedo FL Zip Code: 32765

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: OP ☒ Delete
NAME: POLOMSKY, EDWARD W SR
STREET ADDRESS: PO BOX 620538 700 E CHAMPAN RD
CITY-ST-ZIP: OVIDO FL 32762

TITLE: VPD ☐ Delete
NAME: POLOMSKY, CHARLENE A
STREET ADDRESS: PO BOX 620538 700 E CHAPMAN RD
CITY-ST-ZIP: OVIDO FL 32762

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☒ Change ☐ Addition
NAME: Polomsky Edward W Jr
STREET ADDRESS: PO Box 620538 326 Carolyn Drive
CITY-ST-ZIP: Oviedo FL 32765

TITLE: ☒ Change ☐ Addition
NAME: Polomsky Charlene
STREET ADDRESS: PO Box 620538 326 Carolyn Drive
CITY-ST-ZIP: Oviedo FL 32765

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward Walter Polomsky Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Edward Walter Polomsky Jr (407)
4-3-06 366-8915