

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000006237

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** MUNRO'S LANDSCAPING & WATER GARDENS, INC.

**Current Principal Place of Business:**

MUNRO'S LAWN CARE LANDSCAPING  
HOMOSASSA, FL 34446

**New Principal Place of Business:**

MUNRO'S LAWN CARE LANDSCAPING  
7039 W. GROVER CLEVELAND  
HOMOSASSA, FL 34446

**Current Mailing Address:**

7039 W GROVER CLEVELAND  
HOMOSASSA, FL 34446

**New Mailing Address:**

MUNRO'S LAWN CARE LANDSCAPING  
HOMOSASSA, FL 34446

**FEI Number:** 59-3488338

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNRO, MARGARET P  
5472 W PAPRIKA LOOP  
HOMOSASSA, FL 34448 US

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

MUNRO, MARGARET P  
6176 W. WAYWARD WIND LOOP  
HOMOSASSA, FL 34448 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/07/2010

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MUNRO, MARGARET  
Address: 6176 W. WAYWARD WIND LOOP  
City-St-Zip: HOMOSASSA, FL 34448

Title: VMTS  
Name: MUNRO, MARGARET  
Address: 6176 W. WAYWARD WIND LOOP  
City-St-Zip: HOMOSASSA, FL 34448

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: PEGGY MUNRO

PD

04/07/2010

Electronic Signature of Signing Officer or Director

Date