

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000018994

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** POTTER'S PROFESSIONAL LAWN CARE, INC.

**Current Principal Place of Business:**

377 SW 14 AVE  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

377 SW 14 AVE  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 65-0419005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POTTER, GRANT J P  
366 SW 14 AVE  
POMPANO BEACH, FL 33069 US

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

POTTER, GRANT J P  
377 SW 14 AVENUE  
POMPANO BEACH, FL 33069 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:**

04/14/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

**Title:** VP  
**Name:** POTTER, NINA S  
**Address:** 377 SW 14TH AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33069

**Title:** P  
**Name:** POTTER, GRANT J  
**Address:** 377 SW 14TH AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33069

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:** NINA S POTTER

VP

04/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date