

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

04-16-2008 90030 007 ***150.00

DOCUMENT # P98000073547					
1. Entity Name LEE'S LAWN & LANDSCAPE INC.					
Principal Place of Business 685 KAREN DRIVE TITUSVILLE, FL 32780			Mailing Address 685 KAREN DRIVE TITUSVILLE, FL 32780		
2. Principal Place of Business - No P.O. Box # 2420 Keiser CT		3. Mailing Address 2420 Keiser CT			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Titusville FL		City & State Titusville FL		4. FEI Number 59-3548656	
Zip 32780		Country Brevard		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEE, STEVEN D 685 KAREN DRIVE TITUSVILLE, FL 32780			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LEE, STEVEN D ☐ Delete 685 KAREN DRIVE TITUSVILLE, FL 32780		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Steven D. Lee</u> <u>Steven D. Lee</u> <u>President</u> <u>May 13, 08</u> <u>321-689-1009</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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