

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000078997 1. Entity Name BILL'S LAWN CARE & MAINTENANCE, INC.	
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Principal Place of Business 2700 SHAWNEE WAY JACKSONVILLE, FL 32259	Mailing Address 2700 SHAWNEE WAY JACKSONVILLE, FL 32259
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DO NOT WRITE IN THIS SPACE



02282005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2492722	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WYNN, WILLIAM L
2700 SHAWNEE WAY
JACKSONVILLE, FL 32259**

**DO NOT WRITE
IN THIS SPACE**

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 state if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$650.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WYNN, WILLIAM L 2700 SHAWNEE WAY JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WYNN, TERESA 2700 SHAWNEE WAY JACKSONVILLE, FL 32259
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03/02/05-80028-025 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 807, 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: Teresa Wynn Teresa Wynn 2/28/05 904-287-8889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #