2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Feb 14, 2004 08:00 AM Secretary of State

1. Entity Name	MENT # P9900008844 HE LAWN GUY, INC.	10 			Secretary of State	
Principal Place 213 PECAN NOKOMIS, FL		Aaiiing Address 213 PECAN NOKOMIS, FL 34275		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				01212004 No Chg-P CP2E034 (10/03) 4. FEI Number Applied For 65-0952599 Not Applicable 5. Certificate of Status Desired S8.75 Additional Fee Regulired		
5777 BENI SARASOT	, DANIEL L EVA ROAD SOUTH 'A, FL 34233		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 title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be sed to Fees	000000051480 02/16/04-80054-001.150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE DPTS STARKEY, FRANK E 213 PECAN NOKOMIS, FL 34275	ECTORS	,			
TITLE NAME STREET ADDRESS CHY-ST-ZIP	7	*		***************************************		
title name Street abdress City-ST-ZIP				-	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-15			IN 7	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-SI-JIP		and the second seco				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the examption stated in Section 119.07(3)(I). Florida Statutes. I further certify that the information indicated on his 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 diffector of the comporation 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.						