

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000102922

1. Entity Name
WALK-A-BOUT LANDSCAPING, INC.



Principal Place of Business
**2002 LINDA ST.
ORLANDO, FL 32803**

Mailing Address
**2002 LINDA ST.
ORLANDO, FL 32803**



01092006 No Chg-P CP2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3609943	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**INSLEY, MICHAEL
2002 LINDA ST.
ORLANDO, FL 32803**

**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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

000000383092
01/12/06-80031-023 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P INSLEY, MICHAEL F 2002 LINDA STREET ORLANDO, FL 32803
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IN THIS SPACE**

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 to this address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-06 402-894-0809
Date Daytime Phone #