

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S05706

Entity Name: S & S LAWNSCAPERS, INC.

FILED
Mar 30, 2004
Secretary of State

Current Principal Place of Business:

10021 FRUITVILLE RD.
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

10021 FRUITVILLE RD.
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 65-0221306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUTZMAN, GERALD
10021 FRUITVILLE RD.
SARASOTA, FL 34340

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STUTZMAN, GERALD,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL

Title: VD () Delete
Name: STUTZMAN, STACY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL

Title: SD () Delete
Name: STUTZMAN, SHIRLEY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL

Title: TD () Delete
Name: STUTZMAN, KELLY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STUTZMAN, GERALD,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

Title: VD (X) Change () Addition
Name: STUTZMAN, STACY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

Title: SD (X) Change () Addition
Name: STUTZMAN, SHIRLEY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

Title: TD (X) Change () Addition
Name: STUTZMAN, KELLY,
Address: 10021 FRUITVILLE RD.
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SHIRLEY STUTZMAN

SD

03/30/2004

Electronic Signature of Signing Officer or Director

_____ Date