2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H76159

FILED Apr 18, 2007 Secretary of State

Entity Name: TOP NOTCH LANDSCAPING & DESIGN, INC.

Current Principal Place of Business: New Principal Place of Business:

9655 87 PLACE SOUTH 9655 87TH PLACE SOUTH

BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33437 US

Current Mailing Address: New Mailing Address:

4780 GLENN PINE LANE 9655 87TH PLACE SOUTH

BOYNTON BEACH, FL 33436 US BOYNTON BEACH, FL 33437 US

FEI Number: 59-2595241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSS, JOHN ROSS, JOHN

4780 GLENN PINE LANE 9655 87TH PLACE SOUTH

BOYNTON BEACH, FL 33436 US BOYNTON BEACH, FL 33437 US

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: JOHN ROSS 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DVS (X) Change () Addition

Name: ROSS, JAMES, Name: ROSS, POLLIE,

Address: 14930 SMITH SUNDY ROAD Address: 9655 87TH PLACE SOUTH
City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: BOYNTON BEACH, FL 33437

Title: P () Delete Title: DPT (X) Change () Addition

Name: ROSS, JOHN Name: ROSS, JOHN

Address: 4780 GLENN PINE LANE Address: 9655 87TH PLACE SOUTH
City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOHN ROSS DPT 04/18/2007