

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K50368

FILED
May 17, 2005
Secretary of State

Entity Name: UNIVERSAL SPRINKLER & LANDSCAPING, INC.

Current Principal Place of Business:

726-B MARY AVENUE
FORT WALTON BEACH, FL 325472444 US

New Principal Place of Business:

Current Mailing Address:

726 B. MARY AVENUE
FORT WALTON BEACH, FL 325472444 US

New Mailing Address:

FEI Number: 59-2958314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATON, JOHN GERALD
726-B MARY AVENUE
FORT WALTON BEACH, FL 32548 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CATON, JOHN GERALD,
Address: 726 B MARY AVE.
City-St-Zip: FT. WALTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CATON, JOHN GERALD,
Address: 726 B MARY AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547

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: JOHN GERALD CATON

PD

05/17/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date