

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094792

Entity Name: DMV TREE SERVICE, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

311 LINCOLN AVE
VALPARAISO, FL 32580

New Principal Place of Business:

Current Mailing Address:

311 LINCOLN AVE
VALPARAISO, FL 32580

New Mailing Address:

FEI Number: 20-0152623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKMAN, JAMES A
200 GOVERNMENT STREET
NICEVILLE, FL 32578 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VOLZ, DAVID M
Address: 311 LINCOLN AVE
City-St-Zip: VALPARAISO, FL 32580

Title: STD () Delete
Name: VOLZ, MARY ELLEN
Address: 311 LINCOLN AVE
City-St-Zip: VALPARAISO, FL 32580

Title: D (X) Delete
Name: GREGORY, STEPHEN P
Address: 805 MAGNOLIA SHORES
City-St-Zip: NICEVILLE, FL 32578

Title: D (X) Delete
Name: ROBERTS, TRACEY S
Address: 1818 RALTAN PALM DRIVE
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID VOLZ

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date