

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000107909

**FILED**  
**Oct 21, 2009**  
**Secretary of State**

**Entity Name:** TRI-COUNTY LANDSCAPE SERVICES, INC.

**Current Principal Place of Business:**

4613 N. UNIVERSITY DRIVE  
SUITE 331  
CORAL SPRINGS, FL 33067 US

**New Principal Place of Business:**

216 NE 9TH STREET  
CAPE CORAL, FL 33909 US

**Current Mailing Address:**

4613 N. UNIVERSITY DRIVE  
SUITE 331  
CORAL SPRINGS, FL 33067 US

**New Mailing Address:**

216 NE 9TH STREET  
CAPE CORAL, FL 33909 US

**FEI Number:** 20-1395607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROGATINSKY & ASSOCIATES, LLC  
2750 N. 29 AVE.  
SUITE 313  
HOLLYWOOD, FL 33020 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: BEN ROGATINSKY

\_\_\_\_\_  
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: BAKER, CHRISTOPHER THEODORE  
Address: 4613 N. UNIVERSITY DRIVE, STE 331  
City-St-Zip: CORAL SPRINGS, FL 33067 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BAKER, CHRISTOPHER THEODORE  
Address: 216 NE 9TH STREET  
City-St-Zip: CAPE CORAL, FL 33909 US

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: CHRISTOPHER BAKER

PRES

10/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date