

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000055024

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Entity Name:** ATLANTIC PLANT AND TREE EXPERTS, INC.

**Current Principal Place of Business:**

3697 D ROAD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 661  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

FEI Number: 27-0450051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AJINKYA, ARVIND  
4524 BUN CLUB RD. #102  
WEST PALM BEACH, FL 33415 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ROBINE, CRAIG E  
Address: 3697 D RD.  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D  
Name: PIERCY, DANIEL E  
Address: 3697 D ROAD  
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby 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 all other like empowered.

SIGNATURE: DANIEL E. PIERCY

OWNE

04/03/2012

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

\_\_\_\_\_ Date