

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000097697

Entity Name: COASTAL TREE CARE INC.

FILED  
May 01, 2012  
Secretary of State

**Current Principal Place of Business:**

9407 SACRAMENTO DRIVE  
NEW PORT RICHEY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

9407 SACRAMENTO DRIVE  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

FEI Number: 45-3798339

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIANNONE, CARMINE  
9407 SACRAMENTO DRIVE  
NEW PORT RICHEY, FL 34655 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: P  
Name: HALE, PAUL  
Address: 17125 ORWELL ROAD  
City-St-Zip: HUDSON, FL 34667 US

Title: VP  
Name: GIANNONE, CARMINE  
Address: 9407 SACRAMENTO DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: ST  
Name: HALE, KATHY  
Address: 17125 ORWELL ROAD  
City-St-Zip: HUDSON, FL 34667 US

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: CARMINE GIANNONE

VP

05/01/2012

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

\_\_\_\_\_  
Date