

**2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F14570

**Entity Name:** GOLDEN LEAF TREE EXPERTS, INC.

**Current Principal Place of Business:**

5085 COLBRIGHT ROAD  
LAKE WORTH, FL 33467-5638

**Current Mailing Address:**

5085 COLBRIGHT ROAD  
LAKE WORTH, FL 33467-5638

**FEI Number:** 59-2682547

**Certificate of Status Desired:** No

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

SMITH, RICHARD J.  
5085 COLBRIGHT ROAD  
LAKE WORTH, FL 33463 US

*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

**Officer/Director Detail :**

Title PD  
Name SMITH, RICHARD J.  
Address 5085 COLBRIGHT ROAD  
City-State-Zip: LAKE WORTH FL  
  
Title CFO  
Name SCANLAN, FRANCIS X  
Address 4301 NW 107 AVE  
City-State-Zip: CORAL SPRINGS FL 33065

Title SD  
Name SMITH, PATRICIA HUNT  
Address 5085 COLBRIGHT ROAD  
City-State-Zip: LAKE WORTH FL  
  
Title OFFICER  
Name SMITH, RICHARD J JR  
Address 5085 COLBRIGHT ROAD  
City-State-Zip: LAKE WORTH FL 33467-5638

*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:** FRANCIS X SCANLAN

CFO

08/03/2020

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date