

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005943

Entity Name: TREES N TRENDS, INC.

FILED  
Mar 28, 2007  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 3207  
PADUCAH, KY 420023207

## New Principal Place of Business:

3229 OLD BENTON ROAD  
PADUCAH, KY 42003

## Current Mailing Address:

P.O. BOX 3207  
PADUCAH, KY 420023207

## New Mailing Address:

FEI Number: 61-1001008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAWLESS, ANGELIA  
5468 TOUCHSTONE DRIVE  
ORLANDO, FL 32819 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: CP ( ) Delete  
Name: WALLACE, JOE L  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42203

Title: DST ( ) Delete  
Name: WALLACE, CYNTHIA L  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42203

Title: V ( ) Delete  
Name: WILCOX, BRUCE A  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42203

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: WALLACE, JOE L  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42003

Title: DST (X) Change ( ) Addition  
Name: WALLACE, CYNTHIA L  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42003

Title: V (X) Change ( ) Addition  
Name: WILCOX, BRUCE A  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42003

Title: V ( ) Change (X) Addition  
Name: EMMERSON, THOMAS R  
Address: 3229 OLD BENTON ROAD  
City-St-Zip: PADUCAH, KY 42003

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE A. WILCOX

V

03/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date