2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Aug 23, 2005 8:00 am Secretary of State DOCUMENT # J63824 1. Entity Name 07-25-2005 90099 015 ***150.00 BATES LANDSCAPING, INC. Principal Place of Business Mailing Address 5249 BROSCHE RD ORLANDO FL 32807 5249 BROSCHE RD ORLANDO FL 32807 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 59-2794967 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BATES, JAMES D 5249 BROSCHE RD Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Delete TITLE Addition ☐ Change BATES, JAMES D NAME NAME 5249 BROSCHE RD STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 CITY-ST-7IP CITY-ST-77P FITLE Delate TITLE T Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BILE Delete MTI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY SI-ZIP CITY-ST-ZIP HTLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - 7IP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete HILLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS Cily-SI-ZIP CITY-SI-7/P 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

FILED



ATTACHMENT 56372 (160047) ATES LANDSCAPING, INC.

> 5249 Brosche Road Orlando, FL 32807 (407) 658-0099

8-16-05

Dear Six

I Paid the \$150,00 For my appeal Report, I did not Receive Any letten or Bill or Annal Report Natice

Thank you Sin Standard 1907-275.0099