

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98719

FILED
Mar 18, 2005
Secretary of State

Entity Name: SUNRISE LANDSCAPE SUPPLY, INC.

Current Principal Place of Business:

8188 N ORANGE BLOSSOM TRAIL
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 940457
MAITLAND, FL 327940457 US

New Mailing Address:

FEI Number: 59-2868252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADFORD, CARTER A.
512 E. WASHINGTON ST.
ORLANDO, FL 32801 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: P () Delete
Name: CATLEDGE, W. WAYNE,
Address: 8188 N ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32854

Title: VPT () Delete
Name: EVANS, LARRY C.
Address: 4227 YORKETOWN RD
City-St-Zip: ORLANDO, FL

Title: V () Delete
Name: KELLY, BRIAN
Address: 1755 LYDALE
City-St-Zip: MAITLAND, FL 327516524

Title: V () Delete
Name: BRUCE, ROBERT T
Address: 1090 KELLY CREEK CIR
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: W. WAYNE CATLEDGE

P

03/18/2005

Electronic Signature of Signing Officer or Director

Date