2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98719

Entity Name: SUNRISE LANDSCAPE SUPPLY, INC.

FILED Apr 25, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

8188 N ORANGE BLOSSOM TRAIL ORLANDO, FL 32810 US

Current Mailing Address: New Mailing Address:

PO BOX 940457 MAITLAND, FL 327940457 US

FEI Number: 59-2868252 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRADFORD, CARTER A.

512 E. WASHINGTON ST.

ORLANDO, FL 32801 US

BAUERLE, KURTIS T
1201 E. ROBINSON STREET
ORLANDO, FL 32801 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: KURT BAUERLE 04/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CATLEDGE, W. WAYNE, CATLEDGE, W. WAYNE, Name: Name: POST OFFICE BOX 940457 POST OFFICE BOX 940457 Address: Address: City-St-Zip: MAITLAND, FL 32794 City-St-Zip: MAITLAND, FL 327940457

Title: VPT () Delete Title: () Change () Addition

 Name:
 EVANS, LARRY C.
 Name:

 Address:
 4227 YORKETOWN RD
 Address:

 City-St-Zip:
 ORLANDO, FL
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 KELLY, BRIAN
 Name:

 Address:
 40 MAITAND GROVE RD
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 BRUCE, ROBERT T
 Name:

 Address:
 1090 KELLY CREEK CIR
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: W. WAYNE CATLEDGE P 04/25/2007