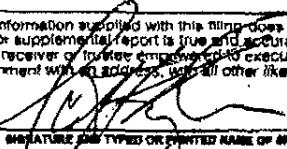


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # M08512			
1. Entry Name EASTCOAST LANDSCAPING, INC.			
Principal Place of Business 14771 64TH WAY NORTH PALM BEACH GARDENS, FL 33418 US		Mailing Address 14771 64TH WAY NORTH PALM BEACH GARDENS, FL 33418 US	
DO NOT WRITE IN THIS SPACE			
		 04252006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2481856	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent BAYLISS, SCOTT 14771 64TH WAY NORTH PALM BCH GDNS, FL 33418		DO NOT WRITE IN THIS SPACE	
9. 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 _____ Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when (re)appointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$850.00		10. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BAYLISS, LOUISA 14771 64TH WAY NORTH PALM BEACH GARDENS, FL 33418		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST BAYLISS, SCOTT 14771 64TH WAY NORTH PALM BEACH GARDENS, FL 33418		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementing 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, and all other like empowered.			
SIGNATURE: 		4/25/06 9614917113 Date Daytime Phone #	