2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000023837

1. Entity Name
DENIS "DOC" MORTHAM'S TREE SERVICE, INC.

Principal Place of Business	Mailing Address
146-18TH AVE. N.E. ST. PETERSBURG, FL 33704	146-18TH AVE. N.E. ST. PETERSBURG, FL 33704

DO NOT WRITE IN THIS SPACE

01072004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3632654	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MORTHAM, DEBORAH R
146-18TH AVE. N.E.
ST. PETERSBURG, FL 33704

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B. 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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U00000105027
4/07/04-8000/-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MORTHAM, DENIS
STREET ADDRESS	146-18TH AVE. N.E.
CITY-ST-ZIP	ST. PETERSBURG, FL 33704

TITLE	STD
NAME	MORTHAM, DEBORAH R
STREET ADDRESS	146-18TH AVE. N.E.
CITY-ST-ZIP	ST. PETERSBURG, FL 33704

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _Deborah R. Mortham_   Deborah R. Mortham   4-5-04   727-822-9208
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #