

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031240

FILED
Jul 24, 2006
Secretary of State

Entity Name: LANDCARE TREE EXPERTS OF FLORIDA, INC.

Current Principal Place of Business:

4330 NW 19TH AVENUE, SUITE H
POMPANO BEACH, FL 33064

New Principal Place of Business:

1301 W. COPANS RD.
BLDG D STE. 5-6
POMPANO BEACH, FL 33064

Current Mailing Address:

4330 NW 19TH AVENUE, SUITE H
POMPANO BEACH, FL 33064

New Mailing Address:

1301 W. COPANS RD.
BLDG D STE. 5-6
POMPANO BEACH, FL 33064

FEI Number: 65-0994450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTER, STEVEN G
4330 NW 19TH AVENUE, SUITE H
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

ALTER, STEVEN G
1301 W. COPANS RD.
BLDG D STE. 5-6
POMPANO BEACH, FL 33064 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:

07/24/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALTER, STEVEN G
Address: 14330 NW 19TH AVE, SUITE H
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALTER, STEVEN G
Address: 1301 W. COPANS RD. BLDG D STE. 5-6
City-St-Zip: POMPANO BEACH, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN G. ALTER

PD

07/24/2006

Electronic Signature of Signing Officer or Director

Date