## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P00000034325

## **FILED** May 02, 2005 8:00 am Secretary of State 05-02-2005 90485 041 \*\*\*150.00

1. Entity Nar CLAYTO		ETT LANDSCAPE	SUPPLY, INC.				w1101~			
Principal Plac	ce of Busines:	\$	Mailing Address			• .	300			
5338 4TH STREET ZEPHYRHILLS, FL 33542			5338 4TH STREET ZEPHYRHILLS, FL 33	·						
2. Principal Place of Business 3			3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-P	CR2E	034 (10/03)	
City & State			City & State	City & State			er 86070			pplied For ot Applicable
Zip	Zip Country		Zip	Zip Country		5. Certificate	of Status Desired		\$8.75 Ad Fee Require	ditional
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FŁ 33134					Name Street Address (P.O. Box Number is Not Acceptable)					
					Street Addres	SS (P.O. Box Numb	er is Not Acceptable	·) 	<del></del>	
					City	<u></u>		FL	Zip Cod	le
	named entity		or the purpose of changing	ts register	ed office or regis	stered agent, or bo	th, in the State of Flo	rida. 1 am	familiar with,	, and accept
SIGNATURE.	Signature, typed	or printed name of registered agen	t and litle if applicable. (N	OTE: Registere	d Agent signature requ	uired when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution										
FIL After M	E NOW!!! ay 1, 200!	FEE IS \$150.00 5 Fee will be \$550		-		55.00 May Be Added to Fees			<del></del> .	
FIL After M	ay 1, 200	FEE IS \$150.00 5 Fee will be \$550 OFFICERS AND	.00 Trust Fund Co	-		Added to Fees	/CHANGES TO OFFI	CERS ANI	DIRECTOR	S IN 11
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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 cath; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PROJ