2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# P00000037653

Entity Name: FOREVER GREEN LANDSCAPING AND TREE CARE, INC.

Current Principal Place of Business:

2815 55TH AVENUE NORTH
ST. PETERSBURG, FL 33714 US

New Principal Place of Business:

Current Mailing Address:

2815 55TH AVENUE NORTH
ST. PETERSBURG, FL 33714 US

New Mailing Address:

FEI Number: 59-3742850 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACFARLAND, GAIL
5713 16TH AVE SOUTH
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: OD ( ) Delete
Name: MACFARLAND, GAIL
Address: 5713 16TH AVE SOUTH
City-St-Zip: GULFPORT, FL 33707 US

Title: P ( ) Delete
Name: PURETZ, KANDE G
Address: 2815 55TH AVE NORTH
City-St-Zip: ST.PETERSBURG, FL 33714 US

Title: OD ( ) Delete
Name: REMBIJAS, RICHARD J
Address: 5991 67TH AVE
City-St-Zip: PINELLAS PARK, FL 33781 US

Title: OD ( ) Delete
Name: ATKINSON, BOBBY J
Address: 6781 30TH AVE
City-St-Zip: ST.PETERSBURG, FL 33714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: GAIL MACFARLAND OD 04/23/2008

Electronic Signature of Signing Officer or Director Date