

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113438

FILED
May 24, 2004
Secretary of State

Entity Name: FLORIDA NATIVESCAPES, INC.

Current Principal Place of Business:

5108 E PARADE ST
TAMPA, FL 33617

New Principal Place of Business:

12012 AQUA ROCK DR.
THONOTOSASSA, FL 33592

Current Mailing Address:

5108 E PARADE ST
TAMPA, FL 33617

New Mailing Address:

12012 AQUA ROCK DR.
THONOTOSASSA, FL 33592

FEI Number: 59-3686138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELD, JEFFREY K JR
10012 OHIO AVE.
THONOTOSASSA, FL 33592

Name and Address of New Registered Agent:

FIELD, JEFFREY K JR
12012 AQUA ROCK DR.
THONOTOSASSA, FL 33592

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: LINDY FIELD

05/24/2004

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: P () Delete
Name: FIELD, LINDY
Address: 10012 OHIO AVE.
City-St-Zip: THONOTOSASSA, FL 33592

Title: VP () Delete
Name: FIELD, JEFFREY K
Address: 10012 OHIO AVE.
City-St-Zip: THONOTOSASSA, FL 33592

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIELD, LINDY
Address: 12012 AQUA ROCK DR.
City-St-Zip: THONOTOSASSA, FL 33592

Title: VP (X) Change () Addition
Name: FIELD, JEFFREY K
Address: 12012 AQUA ROCK DR.
City-St-Zip: THONOTOSASSA, FL 33592

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDY FIELD

P

05/24/2004

Electronic Signature of Signing Officer or Director

Date