

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90263 027 \*\*\*150.00

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| <b>DOCUMENT # P01000005376</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                               |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>1. Entity Name</b><br>TERRY'S TREE SERVICE, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                               |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>Principal Place of Business</b><br>22771 FULLER ROAD<br>BRADENTON, FL 34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                               | <b>Mailing Address</b><br>22771 FULLER ROAD<br>BRADENTON, FL 34211                                                                                                                                                                         |                                                                                                        |                                |
| <b>2. Principal Place of Business</b><br>2824 45th St. E.<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | <b>3. Mailing Address</b><br>2824 45th St. E.<br>Suite, Apt. #, etc.                                                          |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>City &amp; State</b><br>Bradenton, FL 34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | <b>City &amp; State</b><br>Bradenton, FL 34211                                                                                |                                                                                                                                                                                                                                            | <b>4. FEI Number</b><br>65-1083193                                                                     |                                |
| <b>Zip</b><br>34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | <b>Country</b><br>USA                                                                                                         |                                                                                                                                                                                                                                            | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                |
| <b>6. Name and Address of Current Registered Agent</b><br><br>MCKAMEY, TERRY L JR<br>22771 FULLER ROAD<br>BRADENTON, FL 34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                 |                                                                                                                               | <b>7. Name and Address of New Registered Agent</b><br><b>Name</b><br>Terry L. McKamey, Jr.<br><b>Street Address (P.O. Box Number is Not Acceptable)</b><br>2824 45th St. E.<br><b>City</b><br>Bradenton <b>FL</b> <b>Zip Code</b><br>34211 |                                                                                                        |                                |
| <b>8. 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.</b><br><b>SIGNATURE</b> <b>DATE</b> 1/10/06<br><small>(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>                                                                                                                                                                                                          |                                 |                                                                                                                               |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b><br>Trust Fund Contribution. |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                                                                                                               | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                                               |                                                                                                        |                                |
| <b>TITLE</b><br>DP<br><b>NAME</b><br>MCKAMEY, TERRY L JR<br><b>STREET ADDRESS</b><br>22771 FULLER ROAD<br><b>CITY-ST-ZIP</b><br>BRADENTON, FL 34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br>DP<br><b>NAME</b><br>Terry L. McKamey, Jr.<br><b>STREET ADDRESS</b><br>2824 45th St. E.<br><b>CITY-ST-ZIP</b><br>Bradenton, FL 34211                                                                                       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                           |                                |
| <b>TITLE</b><br>V<br><b>NAME</b><br>MCKAMEY, JULIE<br><b>STREET ADDRESS</b><br>22771 FULLER ROAD<br><b>CITY-ST-ZIP</b><br>BRADENTON, FL 34211                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br>S<br><b>NAME</b><br>Julie McKamey<br><b>STREET ADDRESS</b><br>2824 45th St. E.<br><b>CITY-ST-ZIP</b><br>Bradenton, FL 34211                                                                                                | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                           |                                |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br>DV<br><b>NAME</b><br>Lucas G. Davis<br><b>STREET ADDRESS</b><br>2824 45th St. E.<br><b>CITY-ST-ZIP</b><br>Bradenton, FL 34211                                                                                              | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                           |                                |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br>T<br><b>NAME</b><br>Virginia L. Davis<br><b>STREET ADDRESS</b><br>2824 45th St. E.<br><b>CITY-ST-ZIP</b><br>Bradenton, FL 34211                                                                                            | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                           |                                |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                      |                                |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Delete |                                                                                                                               | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b><br><br>                                                                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                      |                                |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b> |                                 |                                                                                                                               |                                                                                                                                                                                                                                            |                                                                                                        |                                |
| <b>SIGNATURE:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                                                                                                               | <b>1/10/06</b>                                                                                                                                                                                                                             |                                                                                                        | <b>(941)748-7691</b>           |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                                                                                                               | <small>Date</small>                                                                                                                                                                                                                        |                                                                                                        | <small>Daytime Phone #</small> |