

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014276

Entity Name: LANDSCAPE ART, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

1440 CORAL RIDGE DRIVE  
SUITE 255  
CORAL SPRINGS, FL 33071

## New Principal Place of Business:

## Current Mailing Address:

1440 CORAL RIDGE DRIVE  
SUITE 255  
CORAL SPRINGS, FL 33071

## New Mailing Address:

FEI Number: 65-1080497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUICE, SHANE R  
4484 NW 112 DRIVE  
CORAL SPRINGS, FL 33076 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: P ( ) Delete  
Name: GUICE, SHANE R  
Address: 4844 NW 112 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP ( ) Delete  
Name: GUICE, ANNE  
Address: 4844 NW 112 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: SEC ( ) Delete  
Name: FRANZ, JOSEPH  
Address: 4941 HAWKES BLUFF AVE  
City-St-Zip: DAVIE, FL 33331

## 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:

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: ANNE GUICE

VP

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date