## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000014276

Entity Name: LANDSCAPE ART, INC.

Title:

Name:

Address:

City-St-Zip:

**FILED** Nov 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1440 CORAL RIDGE DRIVE SUITE 255 CORAL SPRINGS, FL 33071 **New Mailing Address: Current Mailing Address:** 1440 CORAL RIDGE DRIVE SUITE 255 CORAL SPRINGS, FL 33071 FEI Number: 65-1080497 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUICE, SHANE R 4484 NW 112 DRIVE CORAL SPRINGS, FL 33076 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition GUICE, SHANE R Name: Name: 4844 NW 112 DRIVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: GUICE, ANNE Name: 4844 NW 112 DRIVE Address: Address: CORAL SPRINGS, FL 33076 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete () Change () Addition FRANZ, JOSEPH Name: Name: 4941 HAWKES BLUFF AVE Address: Address: City-St-Zip: **DAVIE, FL 33331** 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.

Title:

Name:

Address:

City-St-Zip:

TREA

GUICE, JAMES C

1440 CORAL RIDGE DRIVE

CORAL SPRINGS, FL 33071

( ) Change (X) Addition

SIGNATURE: SHANE GUICE **PRES** 11/25/2009

() Delete