2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000038908

Entity Name: QUALITY LANDSCAPING, INC.

FILED Aug 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1815 LAKE VILLA DR
TAVARES, FL 32778 US
252 W ARDICE AVENUE
EUSTIS, FL 32726 US

Current Mailing Address: New Mailing Address:

1815 LAKE VILLA DR
TAVARES, FL 32778 US

252 W ARDICE AVENUE
EUSTIS, FL 32726 US

FEI Number: 59-3701770 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:

MARTIN, BILLY
1815 LAKE VILLA DR
TAVARES, FL 32778 US

MARTIN, BILLY
252 W ARDICE AVENUE
EUSTIS, FL 32726 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: BILLY MARTIN 08/07/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: PD (X) Change () Addition MARTIN, BILLY Name: MARTIN, BILLY

 Name:
 MARTIN, BILLY
 Name:
 MARTIN, BILLY

 Address:
 1815 LAKE VILLA DR
 Address:
 252 W ARDICE AVENUE

 City-St-Zip:
 TAVARES, FL 32778 US
 City-St-Zip:
 EUSTIS, FL 32726 US

 Name:
 MAYNARD, SUSIE W
 Name:
 MAYNARD, SUSIE W

 Address:
 1815 LAKE VILLA DR
 Address:
 252 W ARDICE AVENUE

 City-St-Zip:
 TAVARES, FL 32778 US
 City-St-Zip:
 EUSTIS, FL 32726 US

Title: VP (X) Delete Title: () Change () Addition

 Name:
 MARTIN, MELISSA
 Name:

 Address:
 1815 LAKE VILLA DR
 Address:

 City-St-Zip:
 TAVARES, FL 32778 US
 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: BILLY MARTIN PD 08/07/2007