

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045601

FILED
Apr 21, 2008
Secretary of State

Entity Name: PIPELINE LANDSCAPING AND IRRIGATION, INC.

Current Principal Place of Business:

317 SEMINOLE STREET
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

317 SEMINOLE STREET
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 02-0597662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROONEY, BETTY J
39 MAPLE ST.
FT. WALTON BEACH, FL 32548 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: PD () Delete
Name: ROONEY, JONATHAN P
Address: 317 SEMINOLE STREET
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: SD () Delete
Name: ROONEY, COLLEN M
Address: 39 MAPLES ST NW
City-St-Zip: FT. WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: ROONEY, COLLEEN M
Address: 39 MAPLES ST NW
City-St-Zip: FT. WALTON BEACH, FL 32548

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: JONATHAN ROONEY

PD

04/21/2008

Electronic Signature of Signing Officer or Director

Date