

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051042

FILED
Apr 29, 2009
Secretary of State

Entity Name: CARDINAL LANDSCAPING SERVICES OF TAMPA, INC.

Current Principal Place of Business:

817 E. OKALOOSA AVENUE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

817 E. OKALOOSA AVENUE
TAMPA, FL 33604

New Mailing Address:

817 E. OKALOOSA AVE.
TAMPA, FL 33604 US

FEI Number: 59-3394554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANTEI, MICHAEL C
1135 WISPER RUN CT.
LUTZ, FL 33558 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: MANTEI, MICHAEL
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604

Title: V () Delete
Name: MANTEI, JEFFREY
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604

Title: V () Delete
Name: MANTEI, MARK S
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MANTEI, MICHAEL
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604 US

Title: V (X) Change () Addition
Name: MANTEI, JEFFREY
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604 US

Title: V (X) Change () Addition
Name: MANTEI, MARK S
Address: 817 E. OKALOOSA AVE.
City-St-Zip: TAMPA, FL 33604 US

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: MICHAEL C. MANTEI

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date