2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000053537

1. Entity Name MOUNTAIN MAN TREE SERVICE, INC.

Principal Place of Business 3510 RAMSEY LANE LAKE WORTH, FL 33461 Mailing Address

3510 RAMSEY LANE LAKE WORTH, FL 33461

FILED Apr 15, 2004 08:00 AM Secretary of State



04092004

No Chg-P

CR2E034 (10/03)

4. FEI Number 35-2169573

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEROW, JEFFREY S 4800 N FEDERAL HWY STE 307B BOCA RATON, FL 33431

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	named entity submits this statement for the plions of registered agent.	surpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature typed or printed name of registered agent and title if applicable. (NOTE Registered Agent				required when reinstaling)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			olng 🔲	\$5.00 May Se Added to Fees		
10. OFFICERS AND DIRECTORS				***************************************		
TITLE NAME STREET ADDRESS CITY -ST - ZIP	D GAYLOR, MAUREEN 3510 RAMSEY LANE LAKE WORTH, FL 33461				1800000114100	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAYLOR, LARRY 3510 RAMSEY LANE LAKE WORTH, FL 33461		U00000114196 04/15/04-80039-022 150.00 DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling cloes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect of if made under oath, that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attack ment with an address, with all other like empowered.						