

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099706

FILED
Apr 04, 2005
Secretary of State

Entity Name: EARTHSCAPES COMPLETE LANDSCAPING, INC.

Current Principal Place of Business:

P. O. BOX 3776
PLANT CITY, FL 33563 US

New Principal Place of Business:

12560 US HWY. 301 NORTH
THONOTOSASSA, FL 33592 US

Current Mailing Address:

P. O. BOX 3776
PLANT CITY, FL 33563 US

New Mailing Address:

12560 US HWY. 301 NORTH
THONOTOSASSA, FL 33592 US

FEI Number: 52-2380128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOFIELD, JANA
3115 WILLIAMS ROAD
PLANT CITY, FL 33565 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: D () Delete
Name: SCOFIELD, JANA
Address: P.O. BOX 3776
City-St-Zip: PLANT CITY, FL 33563 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JANA SCOFIELD

PRES

04/04/2005

Electronic Signature of Signing Officer or Director

Date