

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000102132

FILED
Apr 30, 2004
Secretary of State

Entity Name: GCS LANDSCAPING & DESIGN, INC.

Current Principal Place of Business:

11077 RIDGE POINTE DRIVE
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551541
JACKSONVILLE, FL 322551541

New Mailing Address:

FEI Number: 01-0794462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUST, STEVE
50 N. LAURA STREET
SUITE 2200
JACKSONVILLE, FL 32202 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: P () Delete
Name: GORDON, DONALD
Address: 11510 SHADY MEADOW DRIVE
City-St-Zip: JACKSONVILLE, FL 32258

Title: VPO () Delete
Name: COOLEY, JASON
Address: 11077 RIDGE POINTE DRIVE
City-St-Zip: JACKSONVILLE, FL 32257

Title: S () Delete
Name: SHEPPARD, DAVID
Address: 4746 UNIVERSITY BLVD. NORTH
City-St-Zip: JACKSONVILLE, FL 32277

Title: T () Delete
Name: BROOME, STEPHEN W
Address: 4219 LONGFELLOW ST
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: STEPHEN W BROOME

T

04/30/2004

Electronic Signature of Signing Officer or Director

Date