

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129884

FILED
Sep 07, 2005
Secretary of State

Entity Name: ALPHA AND OMEGA LANDSCAPING, INC.

Current Principal Place of Business:

1220 N JOHN STREET
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

1220 N JOHN STREET
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 55-0817373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, TIMOTHY C
1220 N JOHN STREET
ORLANDO, FL 32808 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: MOORE, TIMOTHY C
Address: 1220 N JOHN STREET
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: MOORE, C. ROY
Address: 4507 PRINCE HALL BLVD
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: MOORE, ROSIE
Address: 4507 PRINCE HALL BLVD
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: MOORE, CHERYL
Address: 1220 N JOHN ST
City-St-Zip: ORLANDO, FL 32808

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: TIMOTHY MOORE

D

09/07/2005

Electronic Signature of Signing Officer or Director

Date