2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCHMENT # P03000006986

FILED Feb 16, 2006 08:00 AM Secretary of State

1. ENRY Name DAVID'S DUVAL TREE SERVICE INC.					Secre	ctary or	State
Principal Plac 9858 RIDGE JACKSONVILI	BLVD	ailing Address 1858 RIDGE BLVD ACKSONVILLE, FL 32208	<u> </u>				
DO NOT WRITE IN THIS SPACE 8. Name and Address of Current Registered Agent BRADSHAW, DAVID			CE	02012006 4. FEI Numbe 36-4511 5. Certificate	9720 of Status Desired	CR2E034 (1	
9858 RIDGE BLVD JACKSONVILLE, FL 32208			DO NOT WRITE IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent. Signature. Signature, typed or proted name of registered agent and title it applicable. (ROTE Registered Agent applicable agent amount of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
FILE NOWIN FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution.			ncing \$5.	.00 May Be led to Fees	Lindar	0437197	
TITLE NAME STREET ADDRESS CSIY-ST-ZIP TITLE NAME STREET ADDRESS CSIY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THAME STREET ADDRESS CITY-ST-ZIP TITLE	P BRADSHAW, DAVID 9858 RIBAULT AVE JACKSONVILLE, FL 32208 V BRADSHAW, MARGARET 9858 RIBAULT AVE JACKSONVILLE, FL 32208	CTORS			NOT W	'RITE	17 [58.00
NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 flustee empowered to execute this report as required by Chapter 507, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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