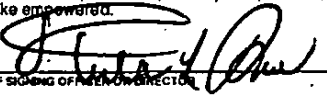


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

02-28-2005 90219 037 ***150.00

DOCUMENT # P03000049656 1. Entity Name TREELAND SOLUTIONS, INC.					
Principal Place of Business 5081 PINE ISLAND ROAD BOKEELIA FL 33922 US			Mailing Address 5081 PINE ISLAND ROAD BOKEELIA FL 33922 US		
2. Principal Place of Business 14320 STRINGFELLOW RD. Suite, Apt. #, etc.		3. Mailing Address P.O. BOX 340 Suite, Apt. #, etc.			
City & State BOKEELIA, FL. Zip 33922		City & State PINELAND, FL. Zip 33945		4. FEI Number APPLIED FOR Applied For ☒ Not Applicable ☐	
Country LEE		Country LEE		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BAER, THEODOR L. 5081 PINE ISLAND ROAD BOKEELIA FL 33922			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 14320 STRINGFELLOW RD. City BOKEELIA FL Zip Code 33922		
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 THEODOR L. BAER  2/21/05 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature is required when registering) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees Trust Fund Contribution, ☐		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAER, THEODOR L 5081 PINE ISLAND ROAD BOKEELIA FL 33922	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14320 STRINGFELLOW ROAD BOKEELIA, FL. 33922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PERREAULT, ROBIN 5081 PINE ISLAND ROAD BOKEELIA FL 33922	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14320 STRINGFELLOW ROAD BOKEELIA, FL. 33922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECY PERRAULT, KENNETH 5081 PINE ISLAND ROAD BOKEELIA FL 33922	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14320 STRINGFELLOW ROAD BOKEELIA, FL. 33922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA BAER, CANDACE J 5081 PINE ISLAND ROAD BOKEELIA FL 33922	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	14320 STRINGFELLOW ROAD BOKEELIA, FL. 33922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: THEODOR L. BAER  2/21/05 (239) 283-9121 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone		