

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086063

FILED
Aug 16, 2007
Secretary of State

Entity Name: THE PROMISED LAND-SCAPERS, INC.

Current Principal Place of Business:

875 TOMLINSON TERRACE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

875 TOMLINSON TERRACE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 13-4268567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGELOFF, PHILLIP W MR.
875 TOMLINSON TERRACE
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

MAGELOFF, PHILLIP W
875 TOMLINSON TERRACE
LAKE MARY, FL 32746 US

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: PHILLIP W. MAGELOFF

08/16/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MAGELOFF, PHILLIP W MR.
Address: 875 TOMLINSON TERRACE
City-St-Zip: LAKE MARY, FL 32746

Title: VSD () Delete
Name: MAGELOFF, CHRISTIE L MS.
Address: 875 TOMLINSON TERRACE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MAGELOFF, PHILLIP W
Address: 875 TOMLINSON TERRACE
City-St-Zip: LAKE MARY, FL 32746

Title: VSD (X) Change () Addition
Name: MAGELOFF, CHRISTIE L
Address: 875 TOMLINSON TERRACE
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PHILLIP W. MAGELOFF

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08/16/2007

Electronic Signature of Signing Officer or Director

Date