2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117786

Entity Name: WILBURTH LANDSCAPING INC

FILED Jan 08, 2007 Secretary of State

Littly Na	IIIe. WILDOR	III LAND	SCAFING INC.			
Current Principal Place of Business:				New Principal Place of Business:		
310 WILLA FRUITLAN	ARD AVE ND PARK, FL	34731				
Current Mailing Address:				New Mailing Address:		
310 WILLA FRUITLAN	ARD AVE ND PARK, FL	34731				
FEI Number	: 20-0341741	FEI Nun	nber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current R	Registered Agent:	Name and Address of	of New Registered Agent:	
310 WILLA FRUITLAN The above	ID PARK, FL	34731	US his statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU		sia Cianat	ure of Degistered Age	4	Data	
Election Car		_	ure of Registered Age nd Contribution ().	ent	Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:) Delete JSSELL P AVE	731	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	O (WILBURTH, DE 310 WILLARD FRUITLAND PA	AVE	731	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O (WILBURTH, DE 310 WILLARD FRUITLAND PA	AVE	731	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O (X GUIONS, JERO 3549 SAILFISH FRUITLAND PA	I AVE.	731	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	O (X) Delete		Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RUSSELL WILBURTH PRES 01/08/2007

REYNOLDS, THOMAS

2300 SOUTHLAND DR.

MT.DORA, FL 32757

Name:

Address:

City-St-Zip: