

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000122072

FILED  
Apr 24, 2005  
Secretary of State

Entity Name: LOGUE'S LANDSCAPING AND IRRIGATION,, INC.

## Current Principal Place of Business:

719 DUBOIS DR.  
FT. WALTON BEACH, FL 32547 FL

## New Principal Place of Business:

2068 PRITCHARD POINT DRIVE  
NAVARRE, FL 32566 FL

## Current Mailing Address:

719 DUBOIS DR.  
FT. WALTON BEACH, FL 32547 FL

## New Mailing Address:

2068 PRITCHARD POINT DRIVE  
NAVARRE, FL 32566 FL

FEI Number: 71-0955278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOGUE, LOUIE S  
719 DUBOIS DR.  
FORT WALTON BEACH, FL 32547 US

## Name and Address of New Registered Agent:

LOGUE, LOUIE S  
2068 PRITCHARD POINT DRIVE  
NAVARRE, FL 32566 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:

04/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete  
Name: LOGUE, LOUIE S  
Address: 719 DUBOIS DR.  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: DIR ( ) Delete  
Name: LOGUE, LOUIE C  
Address: 1551 WEST HWY 98  
City-St-Zip: MARY ESTHER, FL 32569 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: LOGUE, LOUIE S  
Address: 2068 PRITCHARD POINT DRIVE  
City-St-Zip: NAVARRE, FL 32566 US

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: LOUIE S LOGUE

PRES

04/24/2005

Electronic Signature of Signing Officer or Director

Date