2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

ndicatéd on this report or supple<u>n</u> of the corporation of the receive it changed, or on an attachment

SIGNATURE:

Feb 03, 2006 08:00 AM DOCUMENT # P03000133666 **Secretary of State** 1. Entity Name LANDSCAPE CREATIONS WEST, INC. Principal Place of Business Mailing Address 4501 MANATEE AVE WEST 4501 MANATEE AVE WEST #109 BRADENTON FL 34209 BRADENTON FL 34209 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Ant. #, etc. CR2E034 (10/05) 1st MOORE City & State 4. FEI Number Applied For City & State 84-1629012 Not Applicable Country \$8.75 Additional Zω Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name POWERS, GORDON E 1811 48TH STREET W Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34209** City Zip Code 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 privide name of registered agent and tale if applicable (NOTE Registered Agent pignature required when reinstating) OATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **CFFICERS AND DIRECTORS** 10. 11. ☐ Change 🔲 Addition ☐ Delete TITLE TISLE NAME POWERS, GORDON E MAMI U00000418473 02/14/06-80009-003 150.00 STREET ADDRESS 4501 MANATEE AVE W; #109 STREET ADDRESS CHY-ST-ZIP CITY-SI-ZIP BRADENTON FL 34209 Addition ☐ Change TRLE Delete 315516 MAME POWERS, PHILLIP J MANAG STREET ADDRESS STREET ADDRESS 1811 48TH STREET W BRADENTON FL 34209 CITY-ST-ZIP DITY-ST-ZIF Addition ГП Слание ☐ Delcte. 7351.0 NAME NAM STREET ADDRESS STREET AUDRESS CHY-ST-ZIP CRY-ST-ZIP Change Addition Delete 🔲 7177.E 33717 NAME NAME SCREET ADDRESS STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Oelete HUE TITLE MAME NAME STREE! ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information it is due and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director improvement to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 12. I hereby certify that the information supplies

In all other like empowered.

FILED

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