

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134466

FILED
Jan 21, 2008
Secretary of State

Entity Name: ADVANCED TREE SOLUTIONS, INC.

Current Principal Place of Business:

2422 5TH ST
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 701602
ST CLOUD, FL 34770

New Mailing Address:

FEI Number: 56-2416884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, JEREMY S
2422 5TH STREET
ST CLOUD, FL 34769 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
SUITE A
DELTONA, FL 32725 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: DIELEMA Z. VELOZ

01/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOWEN, JEREMY S
Address: P.O. BOX 701602
City-St-Zip: ST CLOUD, FL 34770 02

Title: VP () Delete
Name: WILSON, MICHAEL M
Address: 502 ALABAMA AVE
City-St-Zip: ST CLOUD, FL 34769 02

Title: S () Delete
Name: COOTS, WILLIAM O
Address: P.O. BOX 701602
City-St-Zip: ST CLOUD, FL 34770 02

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWEN, JEREMY S
Address: P.O. BOX 701602
City-St-Zip: ST CLOUD, FL 34770 US

Title: VP (X) Change () Addition
Name: WILSON, MICHAEL M
Address: P.O. BOX 701602
City-St-Zip: ST CLOUD, FL 34770 US

Title: S (X) Change () Addition
Name: COOTS, WILLIAM O
Address: P.O. BOX 701602
City-St-Zip: ST CLOUD, FL 34770 US

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: JEREMY S. BOWEN

P

01/21/2008

Electronic Signature of Signing Officer or Director

Date