2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137643

Address:

City-St-Zip:

FILED Aug 18, 2004 Secretary of State

Entity Name: B	ILL CAMPBELL	'S GREENSCAPES, IN	IC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
224 LAKE WINNIMISSETT DR DELAND, FL 327244842				761 DEERFOOT ROAD DELAND, FL 32720			
Current Mailing		New Maili	New Mailing Address:				
224 LAKE WINNI DELAND, FL 327			761 DEERI DELAND, F	FOOT ROAD FL 32720			
FEI Number: 56-241	8662 FEI No	umber Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desir	red()	
Name and Addre	ess of Current	Registered Agent:	Name and	Address of N	lew Registered Agent:		
CAMPBELL, BILL 224 LAKE WINNI DELAND, FL 32	MISSETT DR		CAMPBEL 761 DEERI DELAND, F	FOOT ROAD			
The above named in the State of Flo		this statement for the p	ourpose of changing i	ts registered o	office or registered agent	, or both,	
SIGNATURE:			08/18/2004				
	Electronic Signa	ature of Registered Age	ent		Date		
		S., the corporation did no	ot receive the prior notic	e.			
OFFICERS AND	_	und Contribution ().	ADDITION	S/CHANGES	TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	DIR (CAMPBELL, W 761 DEERFOC DELAND, FL 3	T ROAD		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	P (CAMPBELL, W 761 DEERFOODELAND, FL 3	T ROAD		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	VP (CAMPBELL, W 761 DEERFOO DELAND, FL 3	T ROAD		
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	T (CAMPBELL, W 761 DEERFOO DELAND, FL 3	T ROAD		
Title: Name:	() Delete		Title: Name:	S () CAMPBELL, W) Change (X) Addition /ILLIAM		

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.

Address:

City-St-Zip:

761 DEERFOOT ROAD

DELAND, FL 32720 US

SIGNATURE: WILLIAM CAMPBELL Ρ 08/18/2004