

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138053

FILED  
Mar 27, 2006  
Secretary of State

Entity Name: STEVE PERRY LANDSCAPING, INC,

**Current Principal Place of Business:**

5413 WEST SLIGH AVE  
B  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

13432 BELLINGHAM DRIVE  
TAMPA, FL 33625 US

**New Mailing Address:**

FEI Number: 90-0121550      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PERRY, STEVEN P  
13432 BELLINGHAM DRIVE  
TAMPA, FL 33625 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PERRY, STEVEN P  
Address: 5413 W. SLIGH AVE, UNIT B  
City-St-Zip: TAMPA, FL 33634 US

Title: VP (X) Delete  
Name: COTTON, MICHAEL  
Address: 5143 W. SLIGH AVE.  
City-St-Zip: TAMPA, FL 33634

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: STEVEN P PERRY

P

03/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date