2005 FOR PROFIT CORPORATION ANNUAL REPORT						FILED May 02, 2005 8:00 am				
DOCUMENT # P03000147558 1. Entity Name ESTATE LANDSCAPE LIGHTING CO.						Secretary of State 05-02-2005 90482 004 ***150.00				
Principal Place of Business Mailing Address 5547 WESSON RD. 5547 WESSON RD. NEW PORT RICHEY, FL 34655 NEW PORT RICHEY, FL			:							
2. Principal P	Hace of Business Tarragon Lane	3. Mailing Address 2138 Tar	ragon	Lane						
Suite, Apt. #, etc.			0		04292005 Chg-P CR2E034 (10/03)					
Zin	Port Richey Fl	New Port Rin	<u>Chec</u>	F(	4. FEI Numb	1433046		- 1	plied For t Applicable	
- 346	6. Name and Address of Current F	Zip 34655 Registered Agent				of Status Desired	E Fe	ee Required		
GIDARO, GREGORY 5547 WESSON RD. NEW PORT RICHEY, FL 34655						Sregory er is Nor Acceptable Agon Lo	יי אה כ		-	
the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its r	Cit egistered off		Por + R, ed agent, or bo	· · · ·	FL prida. I am fai	Zip Code 34 miliar with,	655 and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	d tibe if applicable. (NOTE:	Registered Agen	t signature required	when reinstating)	····	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaig 0 Trust Fund Contril			.00 May Be ed to Fees					
10.	OFFICERS AND DIRECTORS				ADDITIONS	CHANGES TO OFF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GIDARO, GREGORY 5547 WESSON RD. NEW PORT RICHEY, FL 34655	Delete	TITLE NAME STREET ADD CITY-ST-ZD	RESS 21	daro (: 38 Tarr	oregory agon Lan Richey		PChange 4455	Addition	
TITLE NAME Street Address City-st-Zip		Delete	TITLE NAME STREET ADD CITY-ST-ZI	RESS	<u>~</u>	- Cher	<u>) ( )</u> (	Change	Addition	
TITLE NAME Street address City - St - Zip		Delete	TITLE NAME Street add City-st-Zi				[	] Change	Addition	
title Name Street address City+st-zip		🗌 Delete	TITLE NAME STREET ADD CITY-ST-ZI				[	Change	Addition	
title Name Street address City-st-Zip		Delete	TITLE NAME STREET ADD CITY-ST-ZI				[	Change	Addition	
TITLE NAME Street address City-st-zip		Detee	TIFLE NAME STREET ADD CITY-ST-ZF	1		<u> </u>	[	] Change	Addition	
of the cor	sertify that the information supplied with t on this report or supplemental report is I poration or the receiver or trustee empoy or on an attachment with an address, w	rue and accurate and that my wered to execute this report a	/ signature s	hall have the s	same legal effec , Florida Statute	at as if made under o that my name	ath; that I am appears in E	an officer o Block 10 or	or director Block 11 if	
SIGNAT			R DIRECTOR		4/29/	05 (40 Dele	)489. Days	-7/7 <u>3</u> ime Phone #	·	