

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010895

FILED
Sep 03, 2005
Secretary of State

Entity Name: AMERICAN LANDSCAPE & IRRIGATION, INC.

Current Principal Place of Business:

P.O. BOX 351901
PALM COAST, FL 32135

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 351901
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 20-0603056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHEN E. TILLEY, CPA
4465 BAYMEADOWS RD. STE. 3
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

TILLEY & CALLAHAN, PA, CPA'S
4465 BAYMEADOWS RD. STE. 3
JACKSONVILLE, FL 32217 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: STEVE E. TILLEY

09/03/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COBB, CHUCK
Address: 1 PENNSY PL
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: COBB, CINDY
Address: 1 PENNSY PL
City-St-Zip: PALM COAST, FL 32164

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 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.

SIGNATURE: CHUCK COBB

PREZ

09/03/2005

Electronic Signature of Signing Officer or Director

Date