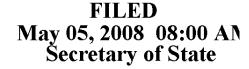
2008 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P04000012947** WORD OF MOUTH TREES AND LANDSCAPING, INC.





Principal Place of Business

SIGNATURE:

Mailing Address

902 SNOWDEN DR. LAKE WORTH, FL 33461-5737 902 SNOWDEN DR. LAKE WORTH, FL 33461-5737

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			CE	4. FEI Numb 20-065			Applied For Not Applicable	
	. •			5. Certificate	of Status Desired		5 Additional lequired	
	6. Name and Address of Current Regis	tered Agent		. 				
LEEPER, DENISE 902 SNOWDEN DR. LAKE WORTH, FL 33461-5737			DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for the pions of registered agent. Signature, typod or preted name of registered agent and life		ed office or registo		ith, in the State of Flori	da. I am familia DATE	r with, and accept	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution		5.00 May Be ded to Fees				
10.	OFFICERS AND DIREC	CTORS				······································		
TITLE	P						-	
NAME	LEEPER, STEVE							
STREET ADDRESS CITY-ST-ZIP	902 SNOWDEN DR. LAKE WORTH, FL 334615737							
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TITLE Name	LEEPER, DENISE		•		06/03/08-8	30038-00:	3 150.00	
STREET ADORESS	902 SNOWDEN DR.		•					
CITY-ST-ZIP	LAKE WORTH, FL 334615737							
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12. I hereby of indicated of the conchanged,	certify that the information supplied with this fi on this report or supplemental report is true a poration or the requiver or trustee empowere or on an attachment with an address, will a	iling does not qualify for the exe and accurate and that my signat d to execute this report as requi to other like empowered.	emptions containe ure shall have the red by Chapter 60	d in Chapter 119 same legal effect 7, Florida Statute	Reprinted the state of the stat	irther certify that th; that I am an appears in Bloc	t the information officer or director k 10 or Block 11 If	

IG OFFICER OR DIRECTOR