

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # P04000014603	
1. Entity Name EMERALD FENCE, INC.	

Principal Place of Business 4915 DAPHNE ST NEW PORT RICHEY, FL 32652	Mailing Address 4915 DAPHNE ST NEW PORT RICHEY, FL 32652
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DO NOT WRITE IN THIS SPACE

03152008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1215164	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RASPIN, APRIL 4915 DAPHNE STREET NEW PORT RICHEY, FL 34652	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U000000904629 05/01/08-80020-014 159.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BASTIEN, BRIAN 4915 DAPHNE ST NEW PORT RICHEY, FL- 32652
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RASPIN, APRIL R 4915 DAPHNE ST NEW PORT RICHEY, FL 32652
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: April Raspin April Raspin Vice president 4/14/08 727-809-1307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #