

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018125

FILED  
Aug 31, 2005  
Secretary of State

Entity Name: GREENPIECE LANDSCAPE MANAGEMENT, INC.

## Current Principal Place of Business:

6608 BISHOPGATE LANE  
NAPLES, FL 34104

## New Principal Place of Business:

2773 SANDY LANE  
NAPLES, FL 34112

## Current Mailing Address:

6608 BISHOPGATE LANE  
NAPLES, FL 34104

## New Mailing Address:

2773 SANDY LANE  
NAPLES, FL 34112

FEI Number: 37-1484599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POZO, OLIVIO  
6608 BISHOPGATE LANE  
NAPLES, FL 34104 US

## Name and Address of New Registered Agent:

POZO, OLIVIO  
2773 SANDY LANE  
NAPLES, FL 34112 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:

08/31/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: POZO, OLIVIO  
Address: 6608 BISHOPGATE LANE  
City-St-Zip: NAPLES, FL 34104

Title: VP ( ) Delete  
Name: POZO, LAURIE  
Address: 6608 BISHOPGATE LANE  
City-St-Zip: NAPLES, FL 34104

Title: T ( ) Delete  
Name: ALVAREZ, SALVADOR  
Address: 3823 TAMiami TRAIL EAST #197  
City-St-Zip: NAPLES, FL 34112

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POZO, OLIVIO  
Address: 2773 SANDY LANE  
City-St-Zip: NAPLES, FL 34112

Title: VP (X) Change ( ) Addition  
Name: POZO, LAURIE  
Address: 2773 SANDY LANE  
City-St-Zip: NAPLES, FL 34112

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: OLIVIO POZO

P

08/31/2005

Electronic Signature of Signing Officer or Director

Date