


FILED  
5 Jun 07, 2005 8:00 am  
Secretary of State

05-03-2005 90157 019 \*\*\*158.75

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

<b>DOCUMENT # P04000022589</b>			
1. Entity Name <b>CONSTRUCTION LANDSCAPE, INC.</b>			
Principal Place of Business <b>640-39TH CT SW VERO BCH, FL 32968</b>		Mailing Address <b>640-39TH CT SW VERO BCH, FL 32968</b>	
2. Principal Place of Business <b>640-39th Ct SW</b>		3. Mailing Address <b>Same</b>	
4. City & State <b>VERO Beach FL</b>		5. City & State <b>VERO Beach FL</b>	
6. ZIP <b>32968</b>		7. ZIP <b>32968</b>	
8. Name and Address of Current Registered Agent <b>ARKEL BARBARA 3453 NW 160TH ST OKEECHOBEE, FL 34972</b>		9. Name and Address of New Registered Agent	
10. The above named entity submits the statements 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: _____ (NOTE: Registered agent signature is required when transferring)			
11. FILE NUMBER FEE IS \$100.00 After May 1, 2005 Fee will be \$200.00		12. Election Campaign Financing True: Func Contribution <input type="checkbox"/> <b>\$5.00</b> may be Added to File	
13. OFFICERS AND DIRECTORS		14. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (N 1)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BEVINS, CHARLES 640-39TH CT SW VERO BCH, FL 32968	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Jenni R. Bevins. 640-39th Ct SW VERO Beach FL 32968
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BT BEVINS, JENNIFER 640-39TH CT SW VERO BCH, FL 32968	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Charles Bevins 640-39th Ct SW VERO Beach FL 32968
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
15. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(2)(c), Florida Statutes. I, the certifier, certify that the information included on this report of shareholders is true and accurate and that my signature also has the same legal effect as if made under oath. I am an officer or director of the corporation or the trustee or trustee emeritus to execute this report as required by Chapter 607, Florida Statutes, and I am my name appears in Book 10 or Book 11, Chapter, or on an instrument with an address, and all other the above.			
SIGNATURE: _____		4-25-05	