

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000026851

1. Entity Name  
MIDSTATE LANDSCAPERS, INC.



Principal Place of Business  
14660 BUCZAK ROAD  
BROOKSVILLE, FL 34614 US

Mailing Address  
14660 BUCZAK ROAD  
BROOKSVILLE, FL 34614 US

**FILED**  
**Jul 11, 2008 08:00 AM**  
**Secretary of State**



07072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**61-1457075**  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

HUNTSMAN, JAMES H  
13823 29TH ROAD  
LAKE CITY, FL 32024

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	HUNTSMAN, JAMES H
STREET ADDRESS	13823 29TH ROAD
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	VP
NAME	HUNTSMAN, MICHELLE L
STREET ADDRESS	13823 29TH ROAD
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000954154

07/11/08-80001-017 150.00

**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:**

*Michelle Huntsman* **Huntsman**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/9/08**

Date

**352-848-**  
**38 1070**

Daytime Phone #