2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030912

Entity Name: ROBERT'S COMPLETE TREE SERVICE, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1354 IONIA STREET

JACKSONVILLE, FL 32206

4135 OLD JENNINGS ROAD
MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

1354 IONIA STREET P.O. BOX 41292 JACKSONVILLE, FL 32206 P.O. BOX 41292 JACKSONVILLE, FL 32203

FEI Number: 20-0734345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBERTS, SHUROD

1354 IONIA STREET

JACKSONVILLE, FL 32206

US

ROBERTS, SHUROD

4135 OLD JENNINGS ROAD

MIDDLEBURG, FL 32068

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: SHUROD ROBERTS 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 ROBERTS, SHUROD
 Name:
 ROBERTS, SHUROD

Address: 1354 IONIA STREET Address: 4135 OLD JENNINGS ROAD
City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHUROD ROBERTS P 04/30/2009