2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036795

Entity Name: TRUSCAPE GROUND SERVICES, INC.

FILED May 15, 2008 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	of Business:	
	OAKLAND AVE D, FL 34760			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
SUITE#1	ECASTLE BLVD. 4 D, FL 32809	PO BOX 770819 WINTER GARDEN, FI	_ 34777	
FEI Number	: 37-1485226 FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		nt: Name and Address o	Name and Address of New Registered Agent:	
909 JOHN	, PAUL A III IS COVE LN), FL 34787 US			
	e named entity submits this statement fo e of Florida.	r the purpose of changing its registered	d office or registered agent, or both,	
SIGNATU				
	Electronic Signature of Registere		Date	
	ice with s. 607.193(2)(b), F.S., the corporation mpaign Financing Trust Fund Contribution (
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VP () Delete TAYLOR, JAMES T 13024 SO. SUNSET TERRACE WINTER GARDEN, FL 34787	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete DORR, RICHARD W 731 OAKLANDO DR ALTAMONTE SPRINGS, FL 32714	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC. () Delete KNUDSON, MARK 1197 JESSAMINE LAKE CT ORLANDO, FL 32839	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PRES () Delete SKINNER, PAUL A III	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PAUL A SKINNER III PRES 05/15/2008

909 JOHNS COVE LANE

OAKLAND, FL 34787

Address:

City-St-Zip: