2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P04000064092

Entity Name: EASTWOOD-TUFF TREE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1615 OKLAHOMA STREET
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

220 WILLIAMS ROAD
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEGELIN, JUDITH I
701 PEACHTREE ROAD
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: EASTWOOD, JASON
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: CRITELLI, REGGIE
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: EASTWOOD, IAN
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: MAINE, SCOTT
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: EASTWOOD, ROBERT
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D, V ( ) Delete
Name: MAZZONE, GABRIEL
Address: 220 WILLIAMS ROAD
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JASON EASTWOOD P 04/28/2005

Electronic Signature of Signing Officer or Director — Date