


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 01, 2008 8:00 am**  
**Secretary of State**

02-01-2008 90029 004 \*\*\*150.00

<b>DOCUMENT # P04000064641</b>	
1. Entity Name <b>LIVING COLOUR LANDSCAPING INC</b>	

Principal Place of Business <b>6615 W. BOYNTON BCH BLVD., #138 BOYNTON BCH, FL 33437-3526</b>	Mailing Address <b>6615 W. BOYNTON BCH BLVD., #138 BOYNTON BCH, FL 33437-3526</b>
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2. Principal Place of Business - No P.O. Box # <b>6126 Western Way City &amp; State Lake Worth, FL Zip 33463 Country USA</b>	3. Mailing Address <b>6126 Western Way City &amp; State Lake Worth, FL Zip 33463 Country USA</b>
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01252008 Chg-P CR2E034 (12/06)

4. FEI Number <b>20-1039916</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent <b>GLANVILLE, SIMON 6764 CORAL REEF ST. LAKE WORTH, FL 33467</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GLANVILLE, SIMON 6615 W. BOYNTON BCH BLVD., #138 BOYNTON BCH, FL 334373526 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Glanville, Simon 6126 Western Way Lake Worth, FL 33463 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GLANVILLE, JUSTINE 6615 W. BOYNTON BCH BLVD., #138 BOYNTON BCH, FL 334373526 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Glanville, Justine 6126 Western Way Lake Worth, FL 33463 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: S. Glanville 1/25/08 (561) 966-4903  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #