


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000068752		
1. Entity Name WAITS TREE SERVICE, INC.		
Principal Place of Business 13907 RAULERSON ROAD RIVERVIEW, FL 33569	Mailing Address 13907 RAULERSON ROAD RIVERVIEW, FL 33569	
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent WAITS, GEORGE W 13907 RAULERSON ROAD RIVERVIEW, FL 33569		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 _____ <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="radio"/> WAITS, GEORGE W 13907 RAULERSON RD RIVERVIEW, FL 33569	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="radio"/> WAITS, SHANNON M 13907 KAULERSON RD RIVERVIEW, FL 33569	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u>Shannon M. Waits</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>5/26/08</u> <small>Date Daytime Phone #</small>



05272008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1082424	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U000000952644
06/04/08-80086-019 150.00