## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081937

City-St-Zip:

FILED Apr 08, 2005 Secretary of State

Entity Name: A-1 QUALITY LANDSCAPING, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2300 NOVA LOT 46 SOUTH DA		ACH, FL 32119			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2300 NOVA ROAD LOT 46 SOUTH DAYTONA BEACH, FL 32119			475 MONTGOMERY PLACE ALTAM ONTE SPRINGS, FL 32714		
FEI Number:	54-2152146	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
STANLEY, THOMPSON L II 2300 NOVA ROAD LOT 46 SOUTH DAYTONA BEACH, FL 32119 US			KELLEY, GOLDBERG 475 MONTGOMERY F ALTAMONTE SPRING	LACE	
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: KYLE KELLEY				04/08/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Can	npaign Financi	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	THOMPSON, 2300 NOVA R		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	THOMPSON, 2300 NOVA R		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	THOMPSON, 2300 NOVA R		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( THOMPSON, 2300 NOVA R		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: STANLEY THOMPSON Ρ 04/08/2005

SOUTH DAYTONA BEACH, FL 32119