

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131267

FILED
Feb 27, 2007
Secretary of State

Entity Name: DEBBIE'S TREE SERVICE, INC.

Current Principal Place of Business:

404 GAY ROAD
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

404 GAY ROAD
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 20-1604455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OTTLEY, DEBORAH
404 GAY ROAD
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC.
465 S. VOLUSIA AVE.
SUITE C
ORANGE CITY, FL 32763 US

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: DEVIN NEWMAN ASST. SECRETARY
Electronic Signature of Registered Agent

02/27/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OTTLEY, DEBORAH
Address: 404 GAY ROAD
City-St-Zip: SEFFNER, FL 33584

Title: P () Delete
Name: SACCO, LARRY G
Address: 404 GAY ROAD
City-St-Zip: SEFFNER, FL 33584 US

Title: VP () Delete
Name: SACCO, LARRY G
Address: 404 GAY ROAD
City-St-Zip: SEFFNER, FL 33584 US

Title: S () Delete
Name: SACCO, LARRY G
Address: 404 GAY ROAD
City-St-Zip: SEFFNER, FL 33584 US

Title: T () Delete
Name: OTTLEY, DEBORAH
Address: 404 GAY ROAD
City-St-Zip: SEFFNER, FL 33584 US

Title: DT () Delete
Name: SACCO, DEBORAH
Address: 404 GAY RD
City-St-Zip: SEFFNER, FL 33584

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 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.

SIGNATURE: LARRY SACCO
Electronic Signature of Signing Officer or Director

P

02/27/2007

Date