2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131267

Entity Name: DEBBIE'S TREE SERVICE, INC.

FILED Aug 01, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
404 GAY ROAD SEFFNER, FL 33584							
Current Mailing Address:				New Mailing Address:			
404 GAY ROAD SEFFNER, FL 33584							
FEI Number: 20-1604455 FEI Number Applied For () FEI Number			FEI Nun	mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							gistered Agent:
ALL FLORIDA FIRM, INC. 465 S. VOLUSIA AVE. SUITE C ORANGE CITY, FL 32763 US				SACCO, LARRY G PRES 404 GAY ROAD SEFFNER, FL 33584 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: LARRY SACCO				08/01/2008			
	Electronic	Signature of Registered Agen	t				Date
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () I OTTLEY, DEBOR 404 GAY ROAD SEFFNER, FL 3			Title: Name: Address: City-St-Zip:	VP SACCO, DEI 404 GAY RC SEFFNER, F	BORAH PAD	() Addition
Title: Name: Address: City-St-Zip:	P () I SACCO, LARRY 404 GAY ROAD SEFFNER, FL 3			Title: Name: Address: City-St-Zip:		() Change	() Addition
Title: Name: Address: City-St-Zip:	VP () I SACCO, LARRY 404 GAY ROAD SEFFNER, FL 3			Title: Name: Address: City-St-Zip:	D SACCO, LAF 404 GAY RC SEFFNER, F	RRY G PAD	() Addition
Title: Name: Address: City-St-Zip:	S () I SACCO, LARRY 404 GAY ROAD SEFFNER, FL 3			Title: Name: Address: City-St-Zip:		()Change	() Addition
Title: Name: Address: City-St-Zip:	T () I OTTLEY, DEBOR 404 GAY ROAD SEFFNER, FL 3			Title: Name: Address: City-St-Zip:	T SACCO, DEI 404 GAY RC SEFFNER, F	BORAH PAD	()Addition
Title: Name: Address:	DT () [SACCO, DEBOR 404 GAY RD	Delete AH		Title: Name: Address:		() Change	() Addition

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: LARRY SACCO P 08/01/2008

SEFFNER, FL 33584

City-St-Zip: