

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000003972

FILED
Mar 16, 2007
Secretary of State

Entity Name: TREE OF LIFE LAWN SERVICES, INC.

Current Principal Place of Business:

5660 KIMBERTON WAY
LAKE WORTH, FL 33463

New Principal Place of Business:

7281 DAVIT CIRCLE
LAKE WORTH, FL 33467

Current Mailing Address:

5660 KIMBERTON WAY
LAKE WORTH, FL 33463

New Mailing Address:

7281 DAVIT CIRCLE
LAKE WORTH, FL 33467

FEI Number: 20-2132434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELL, GREG
5660 KIMBERTON WAY
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

HENDERSON, WILLIAM J
7281 DAVIT CIRCLE
LAKE WORTH, FL 33467 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: WILLIAM J HENDERSON

03/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BELL, GREG
Address: 5660 KIMBERTON WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: VD () Delete
Name: RUIZ, REYES
Address: 5660 KIMBERTON WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: SD () Delete
Name: BELL, ILEANA
Address: 5660 KIMBERTON WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: TD (X) Delete
Name: RUIZ, DORI
Address: 5660 KIMBERTON WAY
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELL, GREG
Address: 7281 DAVIT CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: VD (X) Change () Addition
Name: RUIZ, REYES
Address: 7281 DAVIT CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: ST (X) Change () Addition
Name: HENDERSON, WILLIAM J
Address: 7281 DAVIT CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

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: WILLIAM J HENDERSON

TD

03/16/2007

Electronic Signature of Signing Officer or Director

Date