

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059285

FILED
Feb 18, 2007
Secretary of State

Entity Name: NATURZONE ENVIRONMENTAL SERVICES, INC.

Current Principal Place of Business:

1899 PORTER LAKE DRIVE.
#103
SARASOTA, FL 34240 US

New Principal Place of Business:

Current Mailing Address:

3943 DORAL DRIVE
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONGFELLOW, DOUGLAS J
3943 DORAL DRIVE
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: LONGFELLOW, DOUGLAS J
Address: 3943 DORAL DRIVE
City-St-Zip: TAMPA, FL 33634 US

Title: CFO () Delete
Name: WOLOSZEN, LAURIE A DR.
Address: 3943 DORAL DRIVE
City-St-Zip: TAMPA, FL 33634 US

Title: D (X) Delete
Name: STUDDMAN, MARK
Address: 2057 MISTY SUNRISE TRAIL
City-St-Zip: SARASOTA, FL 34240 US

Title: D (X) Delete
Name: WELLBROCK, TRAVIS
Address: 5167 DEWEY PLACE
City-St-Zip: SARASOTA, FL 34252 US

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:

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: DOUGLAS J LONGFELLOW

PRES

02/18/2007

Electronic Signature of Signing Officer or Director

Date