2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2006
Secretary of State

DOCUMENT# P05000059773

Entity Name: STEVE TIMMONS TREE SERVICE INC

Current Principal Place of Business:

6747 KETONA RD
NORTH PORT, FL 34287 US

New Principal Place of Business:

Current Mailing Address:

6747 KETONA RD
NORTH PORT, FL 34287 US

New Mailing Address:

FEI Number: 20-2727383 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIMMONS, STEVE
6747 KETONA RD
NORTH PORT, FL 34287 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: TIMMONS, STEVE
Address: 6747 KETONA RD
City-St-Zip: NORTH PORT, FL 34287 US

Title: VP ( ) Delete
Name: TIMMONS, NICKI
Address: 6747 KETONA RD
City-St-Zip: NORTH PORT, FL 34287 US

Title: T ( ) Delete
Name: TIMMONS, JIM
Address: 6747 KETONA RD
City-St-Zip: NORTH PORT, FL 34287 US

Title: S ( ) Delete
Name: TROXLER, JAMES
Address: 6747 KETONA RD
City-St-Zip: NORTH PORT, FL 34287 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: S (X) Change ( ) Addition
Name: TIMMONS, NICKI
Address: 6747 KETONA RD
City-St-Zip: NORTH PORT, FL 34287 US

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: NICKI D TIMMONS VP 07/01/2006

Electronic Signature of Signing Officer or Director Date