

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-13-2006 90022 009 ***150.00

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1st MOORE CR2E034 (10/05)

DOCUMENT # P05000066163					
1. Entity Name VAR LANDSCAPE CONSULTANTS INC.					
Principal Place of Business 1948 PORT ST LUCIE BLVD PORT ST LUCIE FL 34952		Mailing Address 1948 PORT ST LUCIE BLVD PORT ST LUCIE FL 34952			
2. Principal Place of Business 830 NE Rpt Tilton Place		3. Mailing Address Suite, Apt. #, etc.			
City & State Jensen Beach, FL		City & State		4. FEI Number 20-2794396	
Zip 34957		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RYCKMAN, VICTOR 1948 FORT ST LUCIE BLVD PORT ST LUCIE FL 34952			7. Name and Address of New Registered Agent Name: Ryckman, Victor Street Address (P.O. Box Number is Not Acceptable): 830 NE Rpt Tilton Place City: Jensen Beach FL Zip Code: 34957		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:				DATE: 1/27/06	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D RYCKMAN, VICTOR 1948 PORT ST LUCIE BLVD PORT ST LUCIE FL 34952	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:				DATE: 1/27/06 Daytime Phone #: 772.692.8092	



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2006

VAR LANDSCAPE CONSULTANTS INC.
1948 PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952

Subject: VAR LANDSCAPE CONSULTANTS INC.

Reference Number:

P05000066163

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION