2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 17, 2006
Secretary of State

DOCUMENT# P05000067345

Entity Name: SITESCAPES, INC

Current Principal Place of Business:

5265 SE 39TH LOOP
OCALA, FL 34480

New Principal Place of Business:

11570 NE 49TH STREET
SILVER SPRINGS, FL 34488

Current Mailing Address:

5265 SE 39TH LOOP
OCALA, FL 34480

New Mailing Address:

1271 NE 8TH STREET
OCALA, FL 34470

FEI Number: 20-2800424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOMAN, JAMES S
5265 SE 39TH LOOP
OCALA, FL 34480 US

Name and Address of New Registered Agent:

SURRENCY, TIMOTHY P
11570 NE 49TH STREET
SILVER SPRINGS, FL 34488 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: TIMOTHY P SURRENCY 08/17/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JENKINS, LAYNE A
Address: 5265 SE 39TH LOOP
City-St-Zip: OCALA, FL 34480

Title: VP ( ) Delete
Name: HOMAN, JAMES S
Address: 5265 SE 39TH LOOP
City-St-Zip: OCALA, FL 34480

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SURRENCY, TIMOTHY P
Address: 11570 NE 49TH STREET
City-St-Zip: SILVER SPRINGS, FL 34488

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S ( ) Change (X) Addition
Name: SURRENCY, HILDA B
Address: 1271 NE 8TH STREET
City-St-Zip: OCALA, FL 34470

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: HILDA B SURRENCY S 08/17/2006
Electronic Signature of Signing Officer or Director Date