## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000075467

Entity Name: TROPICAL LANDSCAPE DESIGN & SERVICES, INC

FILED Feb 17, 2011 Secretary of State

Date

**New Principal Place of Business: Current Principal Place of Business:** 11525 MURCOTT WAY LAND O LAKES, FL 34638 **Current Mailing Address: New Mailing Address:** 11525 MURCOTT WAY LAND O LAKES, FL 34638 FEI Number: 59-3805227 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLBROOK, MARY ELLEN B 11525 MURĆOTT WAY LAND O LAKES, FL 34638 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: Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title:

HOLBROOK, R. ANTHONY Name: 11525 MURCOTT WAY Address: City-St-Zip: LAND O LAKES, FL 34638

Title:

Name: HOLBROOK, RALPH A 11525 MURCOTT WAY Address: LAND O' LAKES, FL 34638 City-St-Zip:

Title:

HOLBROOK, RALPH A Name: 11525 MURCOTT WAY Address: City-St-Zip: LAND O' LAKES, FL 34638

Title:

HOLBROOK, MARY ELLEN B Name: Address: 11525 MURCOTT WAY City-St-Zip: LAND O' LAKES, FL 34638

Title:

Name: HOLBROOK, MARY ELLEN B Address: 11525 MURCOTT WAY City-St-Zip: LAND O' LAKES, FL 34638

Title:

HOLBROOK, MARY ELLEN B Name: Address: 11525 MURCOTT WAY City-St-Zip: LAND O' LAKES, FL 34638

I hereby 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 all other like empowered.

SIGNATURE: MARY ELLEN BUECHEL HOLBROOK TR 02/17/2011