## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000035053

Entity Name: TERRA SCAPES DESIGN CONCEPTS, INC.

**FILED** Sep 05, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

P.O. BOX 37 6814 NE 35H LN

ANTHONY, FL 32617 SILVER SPRINGS, FL 34488

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 37 ANTHONY, FL 32617

FEI Number: 65-1275349 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:

SULLIVAN, SEAN A SULLIVAN, SEAN A 15269 NE HWY 314 6814 NE 35TH LANE

SILVER SPRINGS, FL 34488 US 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: 09/05/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete SHEWEY, DAVID SHEWEY, DAVID Name: 15269 NE HWY 314 6814 NE 35H LANE Address: Address:

City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: SILVER SPRINGS, FL 34488

( ) Delete Title: STD Title: STD (X) Change ( ) Addition

Name: SULLIVAN, SEAN A Name: SULLIVAN, SEAN A 15269 NE HWY 314 Address: 6814 NE 35H LANE Address: SILVER SPRINGS, FL 34488 SILVER SPRINGS, FL 34488 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID M SHEWEY PD 09/05/2007