

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052404

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: NATURAL IMAGE LANDSCAPING INC

## Current Principal Place of Business:

4307 TARPON DR. SE  
SAINT PETERSBURG, FL 33705 US

## New Principal Place of Business:

## Current Mailing Address:

4307 TARPON DR. SE  
SAINT PETERSBURG, FL 33705 US

## New Mailing Address:

FEI Number: 90-0285689

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCARELITT, STEVEN  
4307 TARPON DR SE  
ST PETEREBURG, FL 33705 US

## Name and Address of New Registered Agent:

SCARCLIFF, STEVEN  
4307 TARPON DR SE  
ST PETEREBURG, FL 33705 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: STEVE SCARCLIFF

07/09/2007

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: D ( ) Delete  
Name: SCARCLIFF, STEVEN  
Address: 4307 TARPON DR. SE  
City-St-Zip: SAINT PETERSBURG, FL 33711 US

Title: D ( ) Delete  
Name: SCHWABE, JOSHUA  
Address: 6140 LYNN LAKE DR. SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33711 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: SCHWABE, JOSHUA  
Address: 4307 TARPON DR. S.E.  
City-St-Zip: ST. PETERSBURG, FL 33705 US

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: STEVE SCARCLIFF

D

07/09/2007

Electronic Signature of Signing Officer or Director

Date