2008 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Apr 17, 2008 08:00 All Secretary of State **DOCUMENT # P06000133426** 1. Entity Name RESURRECTION TREE & DEBRIS REMOVAL, INC. Principal Place of Business Mailing Address 313 CHEROKEE TRAIL P. O. BOX 3237 PENSACOLA, FL 32506 PENSACOLA, FL 32516 No Chg-P CR2E034 (11/05) 04072008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-8530617 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLACK, KEITH A DO NOT WRITE 313 CHEROKEE TRAIL PENSACOLA, FL 32506 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 000000904506 05/01/08-80015-016 150.00 10. OFFICERS AND DIRECTORS TITLE BLACK, KEITH A NAME 313 CHEROKEE TRAIL STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32506 VPST

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

TITLE

NAME STREET ADDRESS

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CITY-ST-ZIP

BLACK, WYNDOLYN J

313 CHEROKEE TRAIL

PENSACOLA, FL 32506