2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147394

Entity Name: TRIPLE "S" LAND CLEARING, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9656 105TH DR 9656 105TH DRIVE LIVE OAK, FL 32060 LIVE OAK, FL 32060

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1525 9656 105TH DR LIVE OAK, FL 32064 LIVE OAK, FL 32060

FEI Number: 20-5913522 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:

COULTHURST, BARBARA SKINNER, DRU'ANNE S 172 W MAIN ST 9656 105TH DRIVE MAYO, FL 32066 US LIVE OAK, FL 32060 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: DRU'ANNE S. SKINNER 05/01/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SKINNER, CLAUDE W SKINNER, CLAUDE W Name: Name: 9656 105TH DR POST OFFICE BOX 1525 Address: Address: City-St-Zip: LIVE OAK, FL 32060 City-St-Zip: LIVE OAK, FL 32064

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

SKINNER, DRU-ANNE S Name: SKINNER, DRU-ANNE Name: 9656 105TH DR Address: POST OFFICE BOX 1525 Address: LIVE OAK, FL 32064 LIVE OAK, FL 32060 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: DRU'ANNE S. SKINNER **VPD** 05/01/2007