

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011821

FILED  
Jul 31, 2008  
Secretary of State

Entity Name: ROYAL PALM LANDSCAPING AND MAINTENANCE, INC.

## Current Principal Place of Business:

8113 REVELS ROAD  
RIVERVIEW, FL 33569

## New Principal Place of Business:

587 KEN HUBBARD RD.  
TERRA CEIA, FL 34250

## Current Mailing Address:

8113 REVELS ROAD  
RIVERVIEW, FL 33569

## New Mailing Address:

PO BOX 327  
TERRA CEIA, FL 34250

FEI Number: 20-8358104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHAGEN, DONALD L III  
8113 REVELS ROAD  
RIVERVIEW, FL 33569 US

## Name and Address of New Registered Agent:

ASSHA, WADE A  
587 KEN HUBBARD RD  
TERRA CEIA, FL 34250 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: WADE A ASSHA

07/31/2008

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: ASSHA, WADE  
Address: 587 KEN HUBBARD ROAD  
City-St-Zip: TERRA CEIA, FL 34250

Title: D (X) Delete  
Name: COHAGEN, DONALD L III  
Address: 8113 REVELS ROAD  
City-St-Zip: RIVERVIEW, FL 33569

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WADE A ASSHA

D

07/31/2008

Electronic Signature of Signing Officer or Director

Date