


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 8:00 am
Secretary of State

04-29-2008 90087 008 ***150.00

DOCUMENT # P07000031433 1. Entity Name HUNTERS TREE SERVICE, INC.					
Principal Place of Business 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312			Mailing Address 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312		
2. Principal Place of Business - No P.O. Box # 1937 HUCKABEE RD Suite, Apt. #, etc.		3. Mailing Address 7916 Briarcreek Rds Suite, Apt. #, etc.			
City & State Tallahassee, FL		City & State Tallahassee, FL		4. FEI Number 20-8608995	
Zip 32311	Country U.S.	Zip 32312	Country US	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LORD, CHRISTINA 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312			7. Name and Address of New Registered Agent Name Christina Lord Street Address (P.O. Box Number is Not Acceptable) 7916 Briarcreek Rds City Tallahassee FL Zip Code 32312		
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 <u><i>Christina Lord</i></u> DATE <u>3/20/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LORD, CHRISTINA <input type="checkbox"/> Delete 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lord, Christina <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7916 Briarcreek Rds Talla, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete LORD, DAVID 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lord, David <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7916 Briarcreek Rds Talla, FL 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete BARRETT, SHAWN 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete DECOEUR, LARRY 12020 OTTERCREEK TRL TALLAHASSEE, FL 32312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
SIGNATURE: <u><i>Christina Lord</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>3/20/08 (850) 545-1518</u> <small>Date Daytime Phone #</small>		