

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000102001

FILED
May 01, 2009
Secretary of State

Entity Name: LITESCAPES PROFESSIONAL LANDSCAPE LIGHTING, INC.

Current Principal Place of Business:

50 KINDRED STREET
SUITE 303
STUART, FL 34994

New Principal Place of Business:

6322 LENAPE ST
FT PIERCE, FL 34982

Current Mailing Address:

50 KINDRED STREET
SUITE 303
STUART, FL 34994

New Mailing Address:

6322 LENAPE ST
FT PIERCE, FL 34982

FEI Number: 26-3768026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUEST, JAMES M
GUEST PEAVY GUEST CPA & COMPANY, INC.
50 KINDRED STREET, SUITE 303
STUART, FL 34994 US

Name and Address of New Registered Agent:

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: _____

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: PSTD () Delete
Name: STEWART, TRENT
Address: 50 KINDRED STREET, STE 303
City-St-Zip: STUART, FL 34994

Title: VP () Delete
Name: STEWART, TRENT
Address: 50 KINDRED STREET, STE 303
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: STEWART, TRENT
Address: 6322 LENAPE ST
City-St-Zip: FT PIERCE, FL 34982

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: TRENT STEWART

PSTD

05/01/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date