

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000072412

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL OUTDOORS LANDSCAPE & MAINTENANCE, INC.

**Current Principal Place of Business:**

1030 OCOEE-APOPKA RD  
STE 200  
APOPKA, FL 32704

**New Principal Place of Business:**

**Current Mailing Address:**

1030 OCOEE-APOPKA RD  
STE 200  
APOPKA, FL 32704

**New Mailing Address:**

**FEI Number:** 27-0973040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, ANN  
322 MANDRAKE ST  
ORLANDO, FL 32811 US

**Name and Address of New Registered Agent:**

SMITH, ANN  
7864 BROCKWOOD CIRCLE  
ORLANDO, FL 32822 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: ANN SMITH

02/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CALIFAR, LARRY E III  
Address: 6590 BRENDA DRIVE  
City-St-Zip: APOPKA, FL 32703

Title: VP  
Name: CALIFAR, VALERIE E II  
Address: 6380 BRENDA DR  
City-St-Zip: APOPKA, FL 32703

I hereby 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 all other like empowered.

SIGNATURE: LARRY E CALIFAR III

PRES

02/15/2012

Electronic Signature of Signing Officer or Director

Date