2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED **DOCUMENT # P92000001557** Mar 02, 2006 08:00 AN 1. Entity Name **Secretary of State** FLORIDA TREE WORKS OF VERO BEACH CORPORATION Principal Place of Business Mailing Address 5191 85TH STREET **5191 85TH STREET** VERO BEACH, FL 32967 VERO BEACH, FL 32967 02232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0368487 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WRIGHT, SCOTT DO NOT WRITE 2285 WEST EAU GALLIE BLVD MELBOURNE, FL 32935 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Apant signature required when reinstating) DATE 9. Election Campaign Financing FILE NOWIN FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. П After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE DEPUTY, STEVEN L NAME **5191 85TH STREET** STREET ADDRESS VERO BEACH, FL 32967 CITY-ST-ZIP TITLE NAME 1/00000453692 STREET ADDRESS 03/14/06-80033-010 150.00 CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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 sepptemental 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 of trustee employered 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 an other like employered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

STEVEN I

772)581-4755