



**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000023891</b> 1. Entity Name <b>BIG 'UM TREE SERVICE, INC.</b>																																											
Principal Place of Business <b>3400 HURSEY DRIVE YULEE, FL 32097</b>		Mailing Address <b>3400 HURSEY DRIVE YULEE, FL 32097</b>																																									
<b>DO NOT WRITE IN THIS SPACE</b>		 03122005    No Chg-P    CR2E034 (10/03)																																									
4. FEI Number <b>59-3174654</b>		Applied For <input type="checkbox"/> Not Applicable																																									
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																									
6. Name and Address of Current Registered Agent  <b>SMITH, WILLIAM J 4492 LIMPIN LANE FERNANDINA BEACH, FL 32034</b>		<b>DO NOT WRITE IN THIS SPACE</b>																																									
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable    (NOTE: Registered Agent signature required when reinstating)</small>																																											
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																									
<b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td>DP</td> </tr> <tr> <td>NAME</td> <td>HURSEY, MICHAEL</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3400 HURSEY DRIVE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>YULEE, FL 32097</td> </tr> <tr><td>TITLE</td><td></td></tr> <tr><td>NAME</td><td></td></tr> <tr><td>STREET ADDRESS</td><td></td></tr> <tr><td>CITY-ST-ZIP</td><td></td></tr> <tr><td>TITLE</td><td></td></tr> <tr><td>NAME</td><td></td></tr> <tr><td>STREET ADDRESS</td><td></td></tr> <tr><td>CITY-ST-ZIP</td><td></td></tr> <tr><td>TITLE</td><td></td></tr> <tr><td>NAME</td><td></td></tr> <tr><td>STREET ADDRESS</td><td></td></tr> <tr><td>CITY-ST-ZIP</td><td></td></tr> <tr><td>TITLE</td><td></td></tr> <tr><td>NAME</td><td></td></tr> <tr><td>STREET ADDRESS</td><td></td></tr> <tr><td>CITY-ST-ZIP</td><td></td></tr> </table>		TITLE	DP	NAME	HURSEY, MICHAEL	STREET ADDRESS	3400 HURSEY DRIVE	CITY-ST-ZIP	YULEE, FL 32097	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		1100000284000 04/01/05-80048-024 150.00	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.																																											
		<b>SIGNATURE: <i>Mike Hursey</i>    MIKE HURSEY</b>																																									
		Date <b>3-30-05</b> Daytime Phone # _____																																									