2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P93000076179 1. Entity Name COASTAL LANDSCAPING SERVICES, INC. OF SOUTH FLORIDA



Apr 14, 2006 08:00 AN Secretary of State

FILED

Principal Plac	ce of Business A	failing Address	-]		
7584 GREAT	T OAK DRIVE	7584 GREAT OAK DRIVE				
LAKE WORT	H, FL 33467	LAKE WORTH, FL 33467		1		
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				04042006 No Chg-P CR2E034 (11/05)		
Ω	OO NOT WRITE II	N THIS SPA	CE	4. FEI Number Applied For		
		******		65-0448538 Not Applicable		
				5. Certificate of Status Desired \$8.75 Additional		
			,	Fee Required		
6. Name and Address of Current Registered Agent				**		
DALTON, TERRENCE J 7584 GREAT OAK DRIVE				DO NOT WRITE		
LAKE WORTH, FL 33467				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 tallo if applicable. (NOTE, Registered Agent signature required when reinstalling) DATE						
FiL	E NOW!!! FEE IS \$150.00	 Election Campaign Finan Trust Fund Contribution. 		.00 May Be ded to Fees		
ARGEM	ay 1, 2006 Fee will be \$550.00	Trasti dia congresaron.	ے موں	ied wrees		
10.	OFFICERS AND DIRE	CTORS	t phopogram control control			
IITLE NAME	DALTON, TERRANCE J			The second setting of the second seco		
STREET ADDRESS	7584 GREAT OAK DRIVE			1941.1.4		
CITY-ST-ZIP	LAKE WORTH, FL 33467		ł	entre de la companya		
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NAME	DALTON, SUSAN		•			
STREET ADDRESS CITY-ST-ZIP]			H00000510364		
TITLE	LAKE WORTH, FL 33467		on the same of the same	000000\$10364 04/29/06-80003-021 150.00		
NAME						
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CITY-ST-ZIP	·			DO NOT WRITE		
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12. Thereby 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR