2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008
Secretary of State

DOCUMENT# P94000004985

Entity Name: TROPICAL LANDSCAPE SOLUTIONS, INC.

Current Principal Place of Business:

4020 42ND ST.
SARASOTA, FL 34235

New Principal Place of Business:

Current Mailing Address:

4020 42ND ST.
SARASOTA, FL 34235

New Mailing Address:

FEI Number: 65-0460766 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLAGIOVANNI, FRED
4020 42ND ST.
SARASOTA, FL 34235 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RINALDO, FRANK
Address: 4020 42ND ST.
City-St-Zip: SARASOTA, FL 34235

Title: D ( ) Delete
Name: COLAGIOVANNI, FRED
Address: 4020 42ND ST.
City-St-Zip: SARASOTA, FL 34235

Title: D,VP ( ) Delete
Name: SHUMAN, DANIEL
Address: 5086 OAK RUN DR.
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: RINALDO, FRANK
Address: 413 CLEVELAND DR
City-St-Zip: SARASOTA, FL 34236

Title: PRES (X) Change ( ) Addition
Name: COLAGIOVANNI, FRED
Address: 4020 42ND ST
City-St-Zip: SARASOTA, FL 34235

Title: VP (X) Change ( ) Addition
Name: SHUMAN, DANIEL
Address: 5086 OAK RUN DR.
City-St-Zip: SARASOTA, FL 34243

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: FRANK RINALDO VP 03/10/2008

Electronic Signature of Signing Officer or Director Date