

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90667 006 ***158.75

DOCUMENT # P95000084484

1. Entity Name
NOCTURNAL LANDSCAPING, INC.



Principal Place of Business
**9051 NW 20TH MANOR
CORAL SPRINGS, FL 33071**

Mailing Address
**9051 NW 20TH MANOR
CORAL SPRINGS, FL 33071**

34078595

2. Principal Place of Business
4739 SW Long Bay Drive

3. Mailing Address
4739 SW Long Bay Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03302004 Chg-P CR2E034 (10/03)

City & State
Palm City, FL

City & State
Palm City FL

4. FEI Number
65-0617484

Applied For
Not Applicable

Zip
34990

Country

Zip
34990

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPUTE, CHRISTOPHER W
9051 NW 20TH MANOR
CORAL SPRINGS, FL 33071**

Name

Street Address (P.O. Box Number is Not Acceptable)

4739 SW Long Bay Drive

City **Palm City**

FL

Zip Code
34990

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

[Handwritten Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SPUTE, CHRISTOPHER W
9051 NW 20TH MANOR
CORAL SPRINGS, FL 33071**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**4739 SW Long Bay Drive
Palm City, FL 34990**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SPUTE, BRIDGET C
9051 NW 20TH MANOR
CORAL SPRINGS, FL 33071**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**4739 SW Long Bay Drive
Palm City, FL 34990**

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

[Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/04

Date

Daytime Phone #