## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004877

Entity Name: MAGIC MOMENT LANDSCAPING, INC.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

419 9TH AVE 7745 SEAWARD STREET SHALIMAR, FL 32579 NAVARRE, FL 32566

Current Mailing Address: New Mailing Address:

419 9TH AVE 7745 SEAWARD STREET SHALIMAR, FL 32579 7A45 SEAWARD STREET NAVARRE, FL 32566

FEI Number: 59-3360717 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOYCE, HARVEY B
548 MARY ESTATE CUT-OFF
#325
FORT WALTON BEACH, FL 32548 US

BOYCE, HARVEY BURK
7745 SEAWARD STREET
NAVARRE, FL 32566 US

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: HARVEY BURK BOYCE 07/05/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition BOYCE, HARVEY B BOYCE, HARVEY BURK Name: Name: 548 MARY ESTHER CUT-OFF 3325 7745 SEAWARD STREET Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: NAVARRE, FL 32566

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: BOYCE DAWN MARIE
Name: BOYCE DAWN MARIE

Name:BOYCE, DAWN MARIEName:BOYCE, DAWN MARIEAddress:548 MARY ESTHER CUT-OFF 3325Address:7745 SEAWARD STREETCity-St-Zip:FORT WALTON BEACH, FL 32548City-St-Zip:NAVARRE, FL 32566

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: HARVEY BURK BOYE P 07/05/2007