## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000046039

Entity Name: TWIN TREE SERVICE, INC.

FILED Jun 30, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

11450 NW 56 DR 11450 NW 56 DR

**APT 110 APT 110** 

CORAL SPRINGS, FL 33076 CORAL SPRINGS, FL 33076 US

**Current Mailing Address: New Mailing Address:** 

11450 NW 56 DR 11450 NW 56 DR APT 110 APT 110

CORAL SPRINGS, FL 33076 CORAL SPRINGS, FL 33076 US

FEI Number: 65-0679877 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:

MOALE, KEITH MOALE, KEITH V 11450 NW 56TH DR 11450 NW 56TH DR

**APT 110** APT 110 CORAL SPRINGS, FL 33076 US CORAL SPRINGS, FL 33076 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: KEITH V. MOALE 06/30/2004

> 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:**

Title: () Delete Title: (X) Change ( ) Addition

MOALE, KEITH MOALE, KEITH V Name: Name: 6489 N.W. 80TH TERRACE 11450 N.W. 56TH DR. Address: Address:

City-St-Zip: PARKLAND, FL 33067 City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: (X) Delete Title: () Change () Addition

Name: MOALE, KEITH Name: 11450 NW 56TH DR APT 110 Address: Address: CORAL SPRINGS, FL 33076 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEITH V. MOALE **PRES** 06/30/2004