

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000074633

1. Entity Name
GILLIAM TREE SERVICE, INC.



Principal Place of Business
**7153 CURLEW RD
SARASOTA, FL 34231**

Mailing Address
**7153 CURLEW RD
SARASOTA, FL 34231**



03032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0693139

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GILLIAM, GARY K
7153 CURLEW ROAD
SARASOTA, FL 34231**

**DO NOT WRITE
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 title if applicable

Gary Gilliam / Reg Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

3-30-08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|----------------------------------------------------|-----------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD GILLIAM, GARY K 7153 CURLEW ROAD SARASOTA, FL 34231 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VPD GILLIAM, SUSAN A 7153 CURLEW RD SARASOTA, FL 34231 |
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04/15/08-80038-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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

Gary Gilliam - President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-925-8208