


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90078 041 ***150.00

DOCUMENT # P96000074822	
1. Entity Name HUNTER-GRIFFIN LANDSCAPE, INC.	

Principal Place of Business 2376 APPALOOSA CIR 17356 SARASOTA FL 34240 US Deer Prairie Dr	Mailing Address 17356 Deer Prairie Dr 2376 APPALOOSA CIR SARASOTA FL 34240 US
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MOORE CR2E034 (11/03)

2. Principal Place of Business 17356 Deer Prairie Dr Suite, Apt. #, etc.	3. Mailing Address 17356 Deer Prairie Dr Suite, Apt. #, etc.
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City & State Sarasota, FL	City & State Sarasota, FL
Zip 34240	Zip 34240
Country US	Country US

4. FEI Number 65-0703169	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KING, CLIFFORD M SUITE 855 1800 SECOND STREET SARASOTA FL 34236
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004, Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> Delete
NAME ENRIGHT, HARRY P III	
STREET ADDRESS 2376 APPALOOSA CIR	
CITY-ST-ZIP SARASOTA FL 34240	
TITLE VPDT	<input type="checkbox"/> Delete
NAME ENRIGHT, KIMBERLY A	
STREET ADDRESS 2376 APPALOOSA CIR	
CITY-ST-ZIP SARASOTA FL 34240	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE Enright, Harry P II	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS 17356 Deer Prairie Dr	
CITY-ST-ZIP Sarasota, FL 34240	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS 17356 Deer Prairie Dr	
CITY-ST-ZIP Sarasota, FL 34240	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Kimberly A Enright / Kimberly A Enright **4/15/04** 941-378-8382
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #