Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90005 047 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9800000384

Principal Place of Business P.O. BOX 132 MARCO ISLAND FL 34146  PT. MYERS FL 33912  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 12/3 1/1997  4. FEI Number Applied For 21 Suite, Apt. #, etc. Suite, Apt. #, etc.  City & State  City & State  Zip Country  Applied For South, Apt. #, etc.  Country  Applied For Fee Required  6. Election Campaign Financing Trust Fund Contribution  Suite, Apt. H, is corporation owes the current year Intangible  8. This corporation owes the current year Intangible	1. Corporation	TREE SERVICES, INC.	000364				
MARCO ISLAND FL 34146  FT. MYERS FL 33912  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 12/31/1997  2. Principal Place of Business  2. Applied For 65-0790409  Suite, Apr. F., etc.  City & State  City & State  City & State  2. City & State  2. December 2. December 3.	Principal Place	of Business	Mailing Address			il nutti gålde tirat lætri mint tunt	
12/31/1997   Applied For   Applied For   Applied For   Applied For   Not Applicable					DO NOT WRITE IN TH	IS SPACE	
22. Applied For Status Desired   Applied For Status Desired   Society   Soci		·			3. Date Incorporated or Qualifed		
Suite, Apt. #, etc.  Solution A			Æ		12/31/1997		
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Screen departs   Sc	=:   Timelpai   Idea of Basilioo				,	Applied For	
City & State  Ci	21			<u> </u>	65-0790409	<del></del>	
City & State  Country  R. Trust Fund Contribution  Added to Fees  Added to Fees  Added to Fees  Added to Fees  No  9. Name and Address of Current Registered Agent  BURCH, MICHAEL  17400 LEE ROAD  FT. MYERS FL 33912  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the politiquinos of, Section 607.0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the politiquinos of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  PPT  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12  TITLE  PVPT  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12  TITLE  PVPT  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12  TITLE  PVPT  ACCITY ST. 2P  TT. MYERS FL 33912  THE S#1  DELETE  1.1 TITLE  PVPT  ACCITY ST. 2P  THE MYERS FL 33912  THE S#1  DELETE  2.1 TITLE  S#	Suite, Apt. #, etc. Suite, Apt. #, etc.				5Certificate of Status Desired - =	<b>\$8.75</b> Additional	
28	22		<del></del>			·	
28     28		В	Hanning Tal	اس ا- ما			
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  BURCH, MICHAEL 17400 LEE ROAD FT. MYERS FL 33912  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and geospit the oblightions of, Section 507.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remissing)  DATE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  BURCH, MICHAEL 12 NAME 13 STREET ADDRESS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  CITY-ST-ZIP  TH. MYERS FL 33812  TITLE  S#1  DELETE  11 TITLE  S#1  DELETE  21 TITLE  S#1  DELETE  21 TITLE  S#1  DELETE  21 TITLE  SHEET ADDRESS 2162 41ST ST SW  12 STREET ADDRESS 24 CITY-ST-ZIP  NAPLES FL 33116  22 STREET ADDRESS 24 CITY-ST-ZIP  NAPLES FL 34116  23 STREET ADDRESS 24 CITY-ST-ZIP  NAPLES FL 34116  24 CITY-ST-ZIP  NAPLES FL 34116	23			uno, FL	Trust Fund Contribution		
9. Name and Address of Current Registered Agent  BURCH, MICHAEL 17400 LEE ROAD FT. MYERS FL 33912  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an familiar with, and accept the obligations of, Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, in an familiar with, and accept the obligations of, Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the appointment as registered agent, and familiar with, and accept the appointment as registered agent, and familiar with, and accept the appointment as registered agent agent agent and familiar when remissating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. TITLE    DELETE			~		· ·	~	
BURCH, MICHAEL 17400 LEE ROAD FT. MYERS FL 33912  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the politopions of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the other provisions of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the other provisions of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent. I am familiar with, and accept the other provisions of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent agent. I am familiar with, and accept the other provisions of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In agent agent. I am familiar with, and accept the other purpose of changing its registered agent agent. In agent	24		<u></u>	<u> </u>			
BURCH, MICHAEL  17400 LEE ROAD  FT. MYERS FL 33912  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the oblegations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PVPT  DELETE  1.1 TITLE  PVPT  DELETE  1.1 TITLE  1.2 NAME  BURCH, MICHAEL  1.3 STREET ADDRESS  TY-400 LEE ROAD  1.3 STREET ADDRESS  TY-400 LEE ROAD  1.3 STREET ADDRESS  TITLE  NAME  BURCH, CHRISTOPHER M  STREET ADDRESS  STREET ADDRESS  TY-51-22P  NAPLES FL 33912  Change  Addition  NAPLES FL 34116  DELETE  2.3 STREET ADDRESS  TY-51-22P  NAPLES FL 34116  2.3 STREET ADDRESS  2.4 CITY-51-22P  NAPLES FL 34116  2.4 CITY-51-22P							
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was unfortized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section.607.0505, Florida Statutes.  SIGNATURE  SIGN							
### City ### City ### City ### FL   85   Zip Code ### City ### Cit	P3  Stroot Addroi				ddress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature byped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PVPT  DELETE  1.1 TITLE  Where FL 33912  THANKERS FL 33912  TITLE  S#1  DELETE  1.4 CITY-ST-ZIP  THE S#1  DELETE  2.1 TITLE  Change  Addition  Addition  STREET ADDRESS  STREET ADDRESS  2162 41ST ST SW  NAPLES FL 34116  2.4 CITY-ST-ZIP  NAPLES FL 34116  2.4 CITY-ST-ZIP  NAPLES FL 34116  2.4 CITY-ST-ZIP  NAPLES FL 34116							
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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PVPT  NAME  BURCH, MICHAEL  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  TT. MYERS FL 33912  TITLE  S#1  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  THE S#1  DELETE  2.1 TITLE  Change  Addition  Change  Addition  2.2 NAME  STREET ADDRESS  2.3 STREET ADDRESS  CITY-ST-ZIP  NAPLES FL 34116  2.4 CITY-ST-ZIP  NAPLES FL 34116  2.4 CITY-ST-ZIP					<u>-</u>	L	
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PVPT DELETE 1.1 TITLE  BURCH, MICHAEL  STREET ADDRESS T7400 LEE ROAD  1.3 STREET ADDRESS 17400 Lee Rd  1.4 CITY-ST-ZIP  TITLE S#1 DELETE 2.1 TITLE  NAME  BURCH, CHRISTOPHER M  22 NAME  STREET ADDRESS 2162 41ST ST SW  NAPLES FL 34116  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1.1 TITLE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS 17400 Lee Rd  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 TITLE  1.6 TITLE  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LEE ROAD  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 LACTY ST-ZIP  1.6 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LEE ROAD  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 LACTY ST-ZIP  1.6 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LEE ROAD  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP  1.5 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LEE ROAD  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS IN TITLE  1.4 CITY ST-ZIP  1.4 CITY-ST-ZIP  1.5 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LACTY ST-ZIP  1.0 LACTY ST-ZIP  1.0 LACTY ST-ZIP  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.1 TITLE  1.2 LACTY ST-ZIP  1.4 CITY-ST-ZIP  1.5 LACTY ST-ZIP  1.5 LACTY ST-ZIP  1.7 LACTY ST-ZIP  1.8 LACTY ST-ZIP  1.9 LACTY ST-ZIP  1.0 LACTY ST-ZIP  1.1 LACTY S	SIGNATURE	much	assul	···	·	/	
TITLE PVPT	12					AND DIRECTORS IN 12	
NAME   BURCH, MICHAEL   1.2 NAME   1.3 STREET ADDRESS   17400 LEE ROAD   1.3 STREET ADDRESS   17400 LEE ROAD   1.4 CITY-ST-ZIP   FT. MYERS FL 33912   1.4 CITY-ST-ZIP   FT. MYERS FL 33912   1.4 CITY-ST-ZIP   FT. MYERS FL 33912   1.4 CITY-ST-ZIP   TITLE   1.7 Change   Addition   Addition   1.5 City-ST-ZIP   NAPLES FL 34116   2.4 CITY-ST-ZIP   1.5 CITY-				<del></del>	, , , , , , , , , , , , , , , , , , ,		
STREET ADDRESS         17400 LEE ROAD           CITY-ST-ZIP         1.3 STREET ADDRESS         17400 LEE RO           TITLE         S#1         DELETE         2.1 TITLE           NAME         BURCH, CHRISTOPHER M         22 NAME           STREET ADDRESS         2162 41ST ST SW         23 STREET ADDRESS           CITY-ST-ZIP         NAPLES FL 34116         2'4 CITY-ST-ZIP	i i				•		
CITY-ST-ZIP					MUND Lee Rd.	ļ	
TITLE         \$#1         DELETE         2.1 TITLE         Change         Addition           NAME         BURCH, CHRISTOPHER M         22 NAME					Et MURCS FL.33912		
NAME BURCH, CHRISTOPHER M 22 NAME STREET ADDRESS 2162 41ST ST SW 23 STREET ADDRESS CITY-ST-ZIP NAPLES FL 34116 24 CITY-ST-ZIP			☐ DELETE		F1 V(1 8, 1 = 80 11 =	☐ Change ☐ Addition	
STREET ADDRESS 2162 41ST ST SW 23 STREET ADDRESS CITY-ST-ZIP NAPLES FL 34116 24 CITY-ST-ZIP				<b>I</b>			
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			☐ DELETE			Change Addition	
NACE ARABIC MENTAL STATE				32 NAME			
STREET ADDRESS 17400 LEE ROAD  3.3 STREET ADDRESS /023 Anglers Cove#E - 302  CITY-ST-ZIP FT: MYERS FL 33012  3.4 CITY-ST-ZIP Marco Island, FL 34145				33 STREET ADORESS	1023 Anglers Cove#E-	302	
CITY-ST-ZIP FT: MYERS FL 33912 34 CITY-ST-ZIP Marco Island, FL 34145				34 CITY-ST-ZIP	March Toland El 3414	15	
TITLE   3.4.CTY-ST-ZIP   77.MYENG PL 33912   3.4.CTY-ST-ZIP   77.01 C.D		TI MILIOTE GOTE	□ DELETE	4.1 TITLE	- 3/4/10 FC 041-	Change Addition	
NAME 4.2 NAME			<u> </u>	1			
STREET ADDRESS . 4.3 STREET ADDRESS				1		1	

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

4,4 CITY - ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-58

Daytime P

Change

Change

☐ Addition

☐ Addition

(00) 14 (00)