

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90141 047 ***150.00

DOCUMENT # P98000023710

1. Entity Name

TWIN CITIES LANDSCAPE CORP.



Principal Place of Business

1360 74TH STREET, OCEAN
MARATHON, FL 33050

Mailing Address

1360 74TH STREET, OCEAN
MARATHON, FL 33050



04042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0827780

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WOODLAND, KEVIN C
423 80TH STREET OCEAN
MARATHON, FL 33050

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS
NAME WOODLAND, KEVIN C
STREET ADDRESS 423 80TH ST OCEAN
CITY-ST-ZIP MARATHON, FL 33050

TITLE VP
NAME WOODLAND, ROBIN S
STREET ADDRESS 423 80TH STREET OCEAN
CITY-ST-ZIP MARATHON, FL 33050

TITLE T
NAME DARRAGH, WENDI L
STREET ADDRESS 72 MENTOR DR
CITY-ST-ZIP NAPLES, FL 34110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

Kevin C. Woodland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin C. Woodland

April 4, 2006 305-743-1853

Date

Daytime Phone #