


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 20, 2006 8:00 am**  
**Secretary of State**

03-20-2006 90001 039 \*\*\*150.00

**DOCUMENT # P98000037678**

1. Entity Name  
**DESIGNER MULCH, INC.**



Principal Place of Business      Mailing Address  
**ONE RIVERWAY, SUITE 1400**      **ONE RIVERWAY, SUITE 1400**  
**HOUSTON, TX 77056 US**      **HOUSTON, TX 77056 US**


2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

400300-



03062006      Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
**65-0830906**      Not Applicable

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

6. Name and Address of Current Registered Agent

**CAPITOL CORPORATE SERVICES, INC.**  
**1333 NORTH DUVAL STREET**  
**TALLAHASSEE, FL 32303**

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 \_\_\_\_\_ (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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MENGER, J EDWARD ONE RIVERWAY STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHMENT 1 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC FATJO, TOM J JR ONE RIVERWAY STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KRUSZKA, JEROME M ONE RIVERWAY, STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT FATJO, TOM J III ONE RIVERWAY, STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS CASALINOVA, CHARLES A ONE RIVERWAY, STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPAS PAXTON, MICHAEL L ONE RIVERWAY, STE 1400 HOUSTON, TX 77056 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Mitchell      Kevin Mitchell      3.14.06      713292240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

ATTACHMENT

40033836

# P98000037678

Attachment 1

DESIGNER MULCH, INC.  
FLORIDA ANNUAL REPORT  
FOR PRIVILEGE PERIOD ENDING 12/31/2006

ADDITIONAL OFFICERS AND DIRECTORS

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<u>Name</u>	<u>Address</u>	<u>Title</u>	<u>Dir</u>
JOSEPH J. SCARANO	ONE RIVERWAY, SUITE 1400 HOUSTON, TX 77056	VP	
KEVIN D. MITCHELL	ONE RIVERWAY, SUITE 1400 HOUSTON, TX 77056	VP	
DAVID C. EWELL	ONE RIVERWAY, SUITE 1400 HOUSTON, TX 77056	VP	