2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000106226

Entity Name: LANDSCAPE MANAGEMENT, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
P.O. BOX 1022 NICEVILLE, FL 325881022	

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 1022 NICEVILLE, FL 325881022 US	

FEI Number: 59-3550091   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
ROBERTS, RICHARD A 1018 DARLINGTON OAK DRIVE NICEVILLE, FL 32578 US	

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.

SIGNATURE: _____

          Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PTD	( ) Delete
Name:	ROBERTS, RICHARD A	
Address:	1018 DARLINGTON OAK DR	
City-St-Zip:	NICEVILLE, FL 32578	

Title:	VSM	( ) Delete
Name:	WORN, DAVID A	
Address:	903 LAWTON CT	
City-St-Zip:	FT WALTON BEACH, FL 32547	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

Title:	VSM	(X) Change ( ) Addition
Name:	WORN, DAVID A	
Address:	1411 CAPE LN	
City-St-Zip:	NICEVILLE, FL 32578	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R A ROBERTS   PRES   04/11/2006

          Electronic Signature of Signing Officer or Director   Date