

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019560

Entity Name: TRI-COUNTY TREE SERVICES, INC.

FILED
Jul 01, 2005
Secretary of State

Current Principal Place of Business:

12437 COUNTY ROAD 137
WELLBORN, FL 32094

New Principal Place of Business:

Current Mailing Address:

12437 COUNTY ROAD 137
WELLBORN, FL 32094

New Mailing Address:

FEI Number: 59-3560880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIRAH, JOSEPH
12437 COUNTY ROAD 137
WELLBORN, FL 32094 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHIRAH, JOSEPH
Address: 12437 COUNTY ROAD 137
City-St-Zip: WELLBORN, FL 32094

Title: SD () Delete
Name: SHIRAH, KELLIE
Address: 12437 COUNTY ROAD 137
City-St-Zip: WELLBORN, FL 32094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KELLIE SHIRAH

SD

07/01/2005

Electronic Signature of Signing Officer or Director

Date