

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000035263

1. Entity Name  
TREE INTEGRITYS, INC.



Principal Place of Business

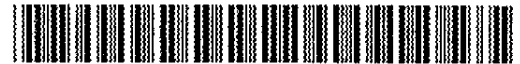
149 N.W. 41ST WAY  
DEERFIELD BEACH, FL 33442

Mailing Address

149 N.W. 41ST WAY  
DEERFIELD BEACH, FL 33442

**DO NOT WRITE IN THIS SPACE**

**FILED**  
**Apr 05, 2004 08:00 AM**  
**Secretary of State**



03182004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0916154

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

ACREE, WALTER  
149 N.W. 41ST WAY  
DEERFIELD BEACH, FL 33442

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT  
NAME ACREE, WALTER  
STREET ADDRESS 149 N.W. 41 WAY  
CITY - ST - ZIP DEERFIELD BEACH, FL 33442

TITLE VPS  
NAME POTTER, SHERRY  
STREET ADDRESS 149 NW 41ST WAY  
CITY - ST - ZIP DEERFIELD BEACH, FL 33442

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY - ST - ZIP

U000000103222  
04/05/04-80047-014 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 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: *Sherry Potter*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3-31-04* *954-428-8998*  
Date Daytime Phone #