

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000046012

Entity Name: GOTH A TREE MOVERS, INC.

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

P O BOX 336
GOTHA, FL 347430336

New Principal Place of Business:

1177 7TH AVE
GOTHA, FL 347430336

Current Mailing Address:

P O BOX 336
GOTHA, FL 347430336

New Mailing Address:

P O BOX 513
GOTHA, FL 347430336

FEI Number: 59-3579681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRANGE, DALE
P.O> BOX 642
GROVELAND, FL 32736 US

Name and Address of New Registered Agent:

STRANGE, DALE
7939 COFFEE CREEK LN
GROVELAND, FL 32736 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: DALE STRANGE

01/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STRANGE, HARRY
Address: 1177 7 STREET
City-St-Zip: GOTHA, FL 34734

Title: VSTD () Delete
Name: STRANGE, DALE
Address: P.O. BOX 642
City-St-Zip: GROVELAND, FL 34736

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 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: DALE STRANGE

VSTD

01/12/2007

Electronic Signature of Signing Officer or Director

Date