

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 14, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90023 049 \*\*\*150.00

**DOCUMENT # P99000065500**

1. Entity Name

SUNTREE ENVIRONMENT SERVICES INC.



Principal Place of Business

4908 N. APOPKA VINELAND RD.  
ORLANDO FL 32818

Mailing Address

4908 N. APOPKA VINELAND RD.  
ORLANDO FL 32818

54033002



MOORE

CR2E034 (11/03)

2. Principal Place of Business

4908 N. APOPKA VINELAND RD

Suite, Apt. #, etc.

ORLANDO

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

4. FEI Number

59-3593033

Applied For

Not Applicable

Zip

32818

Country

ORANGE

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FARLOW, JAMES R JR  
4908 N. APOPKA VINELAND RD.  
ORLANDO FL 32818

7. Name and Address of New Registered Agent

Name

JAMES R FARLOW

Street Address (P.O. Box Number is Not Acceptable)

4908 N APOPKA VINELAND RD

City

ORLANDO

FL

Zip Code

32818

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

*James R Farlow*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE S ☐ Delete  
NAME FARLOW, JAMES R  
STREET ADDRESS 607 ORANGE AVE  
CITY-ST-ZIP OCOEE FL 34761

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*James R Farlow*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/04  
Date

4079471790  
Daytime Phone #