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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S35575 1. Corporation Name

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90173 009 ***150.00

1111 0111	TREE SERVICE, INC.							
Principal Place	e of Business	Mailing Address			t concentration (die extent diener meete er	488 6 8 66 8 18 8 16	ser acace a ra:	
7001 TEMPLE 1	rerr hwy	PO BOX 16307						
TAMPA FL 33637 TAMPA FL 33617				DO NOT WE	ITE IN THIS	SDACE		
US		US			3. Date Incorporated or Qualifect		SI ACE	 -
					03/04/1991			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			59-3070182			Not Applicable
—	Suite, Apt. #, etc. Suite, Apt. #, etc.		; ,		5. Certifcate of Status Desired			Additional Required
22		City & State	v & State		a Floring Compains Financing			
— ·	e	28			Election Campaign Financing Trust Fund Contribution		T	d to Fees
23 Zip	Country	Zip	Cou	intry	8. This corporation owes the cut	rent year Inta		10.100
24	25	29	30		Personal Property Tax.	-	Yes	□No
	9. Name and Address of Currer			1	10. Name and Address of New	Registered A	gent	-
				81 Name				
YOUNG JR, JAMES S.			82 Street Add	dress (P.O. Box Number is Not Accept	table)			
7001 TEMPLE TERR HWY						. 		
1 40	PA FL 33637			83				}
				84 City			85 Zig	Code
		00 - 1 003 4500 Fileda 0	N-1-1 45		was far as basis this statement for the	FL	hanging i	te registered
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligations.	of Florida, Such change vertions of, Section 607.0505	statutes, trie a was authorized 5, Florida Stat	by the corporal utes.	poration submits this statement for the tion's board of directors. I hereby acceptance	ept the appoin	tment as	registered
SIGNATURE						DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	(NOTE: Registered	Agent signature requi	ADDITIONS/CHANGES TO O		D DIRECT	FORS IN 12
TITLE		10 01112010110						
	1 14	☐ DELET	ie (1.1 l)	TLE			Change	
NAME	D Young, James S.JR	☐ DELET	1.1 II 1.2 N		<u>, </u>			
NAME STREET ADDRESS	YOUNG, JAMES S JR	☐ DELET	1.2 N		·			
STREET ADDRESS	YOUNG, JAMES S JR 818 BENNINGER DR	☐ DELET	1.2 N/ 1.3 ST	AME FREET ADORESS	,			
	YOUNG, JAMES S JR	☐ DELET	1.2 N 1.3 ST 1.4 CI	AME TREET ADORESS TTY-ST-ZIP	,			e Addition
STREET ADDRESS CITY-ST-ZIP	YOUNG, JAMES S JR 818 BENNINGER DR		1.2 N 1.3 ST 1.4 CI	AME TREET ADORESS TTY-ST-ZIP TLE	•		Change	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	YOUNG, JAMES S JR 818 BENNINGER DR		1.2 N 1.3 ST 1.4 CI TE 2.1 TI 2.2 N	AME TREET ADORESS TTY-ST-ZIP TLE	•		Change	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	YOUNG, JAMES S JR 818 BENNINGER DR		1.2 N/ 1.3 ST 1.4 CI TE 2.1 TI 2.2 N/ 2.3 ST	AME TREET ADORESS TTY-ST-ZIP TLE AME			Change	e Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME	YOUNG, JAMES S JR 818 BENNINGER DR	☐ DELET	12 NV 1.3 ST 1.4 CI TE 2.1 TI 2.2 N. 2.3 S' 2.4 CI TE 3.1 TI 3.2 N. 3.3 S' 3.4 CI 4.1 TI 4.2 N 4.3 S' 4.4 CI 5.1 TI 5.2 N. 5.3 S' 5.4 CI	AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS STY-ST-ZIP TLE AME TREET ADDRESS STY-ST-ZIP TLE IAME TREET ADDRESS STY-ST-ZIP TLE IAME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS			☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	YOUNG, JAMES S JR 818 BENNINGER DR	☐ DELET	12 No 13 ST 14 CI TE 22 No 23 ST 2, 4 CI TE 3.1 TI 32 No 33 ST 34. CI TE 4.1 TI 52 No 53 ST 54 CI TE 6.1 TE 6.2 No	AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS TTY-ST-ZIP TLE AME TREET ADDRESS TTY-ST-ZIP TLE			☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

14. 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 annual report of supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Blorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or often attachment with an address, with all other like empowered.

SIGNATURE: