2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 525875

Entity Name: HEART OF FLORIDA GREENHOUSES, INC.

FILED Apr 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
- a	iton i inicipal i lace di Dacinico

7555 CREWSVILLE RD

ZOLFO SPRINGS, FL 33890 US

Current Mailing Address: New Mailing Address:

7555 CREWSVILLE RD

ZOLFO SPRINGS, FL 33890 US

FEI Number: 59-1726165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SWANK, CHARLES E.

1430 S. HIGHLANDS AVENUE
P. O. BOX 819
SEBRING, FL 33870 US

SWANK, CHARLES E
1436 PROSPER AVENUE
P. O. BOX 819
SEBRING, FL 33870 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: CHARLES E SWANK 04/07/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 SWANK, BEVERLY W,
 Name:
 SWANK, BEVERLY W

 Address:
 7106 SPARTA RD.
 Address:
 7106 SPARTA RD.

 City-St-Zip:
 SEBRING, FL
 City-St-Zip:
 SEBRING, FL

Title: TD () Delete Title: TD (X) Change () Addition

Name:BRYANT, CHRISTINA,Name:BRYANT, CHRISTINAAddress:7665 CREWSVILLE RDAddress:7665 CREWSVILLE RDCity-St-Zip:ZOLFO SPRINGS, FLCity-St-Zip:ZOLFO SPRINGS, FL

 Name:
 BRYANT, THEO,
 Name:
 BRYANT, THEO

 Address:
 7665 CREWSVILLE RD
 Address:
 7665 CREWSVILLE RD

 City-St-Zip:
 ZOLFO SPRINGS, FL
 City-St-Zip:
 ZOLFO SPRINGS, FL

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 SWANK, CHÂRLES E,
 Name:
 SWANK, CHÂRLES E

 Address:
 7106 SPARTA RD.
 Address:
 7106 SPARTA RD.

 City-St-Zip:
 SEBRING, FL
 City-St-Zip:
 SEBRING, FL

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: CHRISTINA BRYANT TD 04/07/2006