

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005130

Entity Name: G & K NURSERY, INC.

FILED
Mar 18, 2004
Secretary of State

Current Principal Place of Business:

ROUTE 3, BOX 337
LAKE CITY, FL 32025

New Principal Place of Business:

1375 SE CR 349
LAKE CITY, FL 32025

Current Mailing Address:

ROUTE 3, BOX 337
LAKE CITY, FL 32025

New Mailing Address:

1375 SE CR 349
LAKE CITY, FL 32025

FEI Number: 01-0693189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WITT, KENNETH
ROUTE 3, BOX 337
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

WITT, KENNETH
1375 SE CR 349
LAKE CITY, FL 32025 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: _____

03/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WITT, KENNETH
Address: RT. 3, BOX 337
City-St-Zip: LAKE CITY, FL 32025

Title: V () Delete
Name: WITT, GARY
Address: RT. 3, BOX 337
City-St-Zip: LAKE CITY, FL 32025

Title: T () Delete
Name: WITT, LOUISE
Address: RT. 3, BOX 337
City-St-Zip: LAKE CITY, FL 32025

Title: S () Delete
Name: WITT, TRACY
Address: RT. 3, BOX 337
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WITT, KENNETH
Address: 1375 SE CR 349
City-St-Zip: LAKE CITY, FL 32025

Title: V (X) Change () Addition
Name: WITT, GARY
Address: 1375 SE CR 349
City-St-Zip: LAKE CITY, FL 32025

Title: T (X) Change () Addition
Name: WITT, LOUISE
Address: 1375 SE CR 349
City-St-Zip: LAKE CITY, FL 32025

Title: S (X) Change () Addition
Name: WITT, TRACY
Address: 1375 SE CR 349
City-St-Zip: LAKE CITY, FL 32025

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KENNETH WITT

P

03/18/2004

Electronic Signature of Signing Officer or Director

Date