

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000169631	
1. Entity Name THE GREENERY & GARDEN CENTER, INC	

Principal Place of Business 6726 N. LECANTO HWY BEVERLY HILLS, FL 34465	Mailing Address 6726 N. LECANTO HWY BEVERLY HILLS, FL 34465
---	---



01312006 No Chg-P CR2EQ34 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2023546	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PATERACKI, RAYMOND
6726 N LECANTO HWY
BEVERLY HILLS, FL 34465**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and state if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT PATERACKI, RAYMOND R 6726 N LECANTO HWY BEVERLY HILLS, FL 34465
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PATERACKI, KATHERINE 6726 N LECANTO HWY BEVERLY HILLS, FL 34465
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S PATERACKI, RAYMOND K 6726 N. LECANTO HWY BEVERLY HILLS, FL 34465
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

000000441364
03/03/06-80033-013 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Raymond R. Pateracki **RAYMOND R. PATERACKI** **2-16-06** **352-489-5023**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #