

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 166601

**Entity Name:** SOUTHERN STATES NURSERIES INC

**Current Principal Place of Business:**

HIGHWAY 121 SOUTH  
MACCLENLY, FL 32063

**Current Mailing Address:**

5612 SOUTHERN STATE NRSY RD  
MACCLENLY, FL 32063

**FEI Number:** 59-0458275

**Certificate of Status Desired:** No

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

FRASER, RYAN  
HWY 121 SOUTH  
MACCLENLY, FL 32063 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:** RYAN FRASER

04/23/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY

Name LONG, MELISSA

Address 8043 STEWART ROAD

City-State-Zip: MACCLENLY FL 32063

Title PRESIDENT

Name FRASER, RYAN T.

Address HWY 121 SOUTH

City-State-Zip: MACCLENLY FL

Title TREASURER

Name THRIFT, JESSALYN

Address 5726 SOUTHERN STATES  
NURSERIES ROAD

City-State-Zip: MACCLENLY FL 32063

*I hereby 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 all other like empowered.*

**SIGNATURE:** RYAN T FRASER

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04/23/2021

Electronic Signature of Signing Officer/Director Detail

Date