## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 278009** 

Entity Name: DEWAR NURSERIES, INC.

**Current Principal Place of Business:** 

625 W KEENE RD APOPKA, FL 32703

**Current Mailing Address:** 

625 W KEENE RD APOPKA, FL 32703

FEI Number: 59-1031608 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEWAR, WILLIAM E 625 W KEENE ROAD APOPKA, FL 32703 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:

Electronic Signature of Registered Agent

Date

FILED Apr 02, 2025

**Secretary of State** 

2784147187CC

Officer/Director Detail:

Title PD Title VPD

 Name
 DEWAR, WILLIAM E
 Name
 DEWAR, ALEX E

 Address
 625 W. KEENE RD.
 Address
 592 ERROL PKWY

 City-State-Zip:
 APOPKA FL 32703
 City-State-Zip: APOPKA FL 32712

Title SECRETARY

Name DEWAR, PATRICIA E.
Address 625 W. KEENE ROAD
City-State-Zip: APOPKA FL 32703

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: WILLIAM DEWAR

Electronic Signature of Signing Officer/Director Detail

PD

04/02/2025