## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 598883** 

Entity Name: MALLOY'S NURSERY, INC.

**Current Principal Place of Business:** 

2837 N JEFFERSON 2837 N JEFFERSON MONTICELLO, FL 32345 FILED
Mar 19, 2015
Secretary of State
CC8971566312

## **Current Mailing Address:**

2837 N JEFFERSON POST OFFICE BOX 224 MONTICELLO, FL 32345

FEI Number: 59-2007989 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALLOY, HAROLD 2837 N. JEFFERSON MONTICELLO, FL 32344 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

Officer/Director Detail:

Title PD Title SD

Name MALLOY, CLYDE Name RITTER, LOIS M

Address 2837 N JEFFERSON ST Address 2837 N JEFFERSON ST

City-State-Zip: MONTICELLO FL 32344 City-State-Zip: MONTICELLO FL 32344

Title VPD

Name MALLOY, HAROLD
Address 2837 N JEFFERSON ST
City State 7ip: MONTICELLO EL 22244

City-State-Zip: MONTICELLO FL 32344

SIGNATURE: HAROLD MALLOY

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.

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/19/2015