

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 122741

FILED
Jul 05, 2005
Secretary of State

Entity Name: GLEN SAINT MARY NURSERIES COMPANY

Current Principal Place of Business:

7703 GLEN NURSERY RD
GLEN ST. MARY, FL 32040

New Principal Place of Business:

Current Mailing Address:

7703 GLEN NURSERY RD
GLEN ST. MARY, FL 32040

New Mailing Address:

FEI Number: 59-0264780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALOONEY, FRANK E. JR.
5 WEST MACCLENNY AVENUE
MACCLENNY, FL 32063 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TABER III, GEORGE L.
Address: 7703 GLEN NURSERY RD
City-St-Zip: GLEN ST MARY, FL

Title: V () Delete
Name: MCCOLLUM III, O O,
Address: P.O. BOX 604, SR 125 SO
City-St-Zip: GLEN ST MARY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GEORGE L. TABER, III

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07/05/2005

Electronic Signature of Signing Officer or Director

Date